



MIAMI-DADE COUNTY EXPLORATORY MISSION TO INDIA

September 30th Thru October 6th, 2007

REGISTRATION DEADLINE IS AUGUST 1ST, 2007

STANDARD PACKAGE INCLUDES

AIRFARE

- Miami - London - Mumbai - Delhi - London - Miami

LODGING

- **Three nights** hotel lodging in **Mumbai** with breakfast [October 1 - 4, 2007]
- **Two nights** hotel lodging in **New Delhi** with breakfast [October 4 - 6, 2007]

TRANSPORTATION

- Airport transfers
- Transfers from hotels to official venues.

OFFICIAL MEETINGS & LUNCHES

- One lunch in Mumbai
- One lunch in Delhi
- Official Meetings in Mumbai and Delhi

Standard Estimated Non-Refundable
Mission Costs Per Person: **US\$ 4235**

Full Payment Due By **August 1st, 2007**

[See Registration Form for Details]

HOTEL ACCOMMODATION INFORMATION

MUMBAI

The Oberoi Hotel

Narima Point, Mumbai, India

NEW DELHI

The Oberoi Hotel

Dr. Zakir Hussain Marg, New Delhi, India

IMMUNIZATIONS

Vaccinations are recommended for travel to India. Participants are advised to consult their health care provider or physician to obtain necessary vaccinations prior to departure.

ENTRY REQUIREMENTS

A valid **passport** and **visa** are required for entry into India. For instructions about obtaining an entry visa, please contact:

THE CONSULATE GENERAL OF INDIA

1990 Post Oak Blvd

3 Post Oak Central, Suite 600

Houston, TX 77056

Tel: (713) 626-2148; **Fax:** (713) 993-9347

E-mail: cgi-hou@swbell.net

URL: www.cgihouston.org

If you have any questions or need additional information about Miami-Dade County Exploratory Mission to India, please contact:

Desmond Alufohai

Senior Trade Development Specialist

The Jay Malina International Trade Consortium

111 N.W. First Street, 25th Floor, Suite 2560

Miami, FL 33128

Tel: 305-375-5808; Fax: 305-679-7895

E-Mail: alufoha@miamidade.gov; www.miamidade.gov/itc



MISSION TO INDIA: SEPT 30 - OCT 6, 2007

PARTICIPANTS REGISTRATION FORM

First Name: _____ Last Name: _____
[As it appears on your passport]

Date: _____ Signature: _____

A. AIRFARE: Miami-London-Mumbai-Delhi-London-Miami: Please indicate seating preference <input type="checkbox"/> Aisle <input type="checkbox"/> Window <input type="checkbox"/> Exit Row I WILL DEPART NEW DELHI ON OCTOBER _____, 2007. THE AIRLINE WILL CHARGE \$50 FOR RETURN DEVIATION PER PERSON OUTSIDE OF THE MISSION DATES	COST	PARTICIPANTS COST
Economy Class: Round-Trip Airfare Per Person	\$1,600	
Special Business Class: Round-Trip Airfare Per Person [Fare Availability is Limited]	\$7,216	
LODGING Includes bed, breakfast and all applicable taxes - Rates are based on Indian Rupees conversion as of July 6, 2007		
MUMBAI Hotel cost for single occupancy at \$495 per room x 3 nights [October 1 - 4, 2007]	\$1,485	
Hotel cost for double occupancy at \$528 per room x 3 nights [October 1 - 4, 2007]	\$1,584	
NEW DELHI Hotel cost for single occupancy at \$324 per room x 2 nights [October 4 - 6, 2007]	\$648	
Hotel cost for double occupancy at \$377 per room x 2 nights [October 4 - 6, 2007]	\$754	
B. TOTAL LODGING DOUBLE OCCUPANCY: I WILL SHARE MY ROOM WITH _____	\$	
C. REGISTRATION FEE PER PARTICIPANT Includes briefing, administrative cost, transportation, meetings, reception, and offered meals	\$502	
D. OPTIONAL: APPROX. TRANSPORTATION COST PER PERSON TO AGRA [TAJ MAHAL]	\$200	
EXTRA LODGING COST IN NEW DELHI	\$324	
E. ADDITIONAL CHARGES - IF APPLICABLE * SEE IMPORTANT MISSION INFORMATION BELOW	\$	
GRAND TOTAL [A + B + C + D + E]		

METHOD OF PAYMENT

Check # _____

TO REGISTER PLEASE COMPLETE THE ENTIRE REGISTRATION PACKAGE [ONE PER PERSON]. CHECKS SHOULD BE MADE PAYABLE TO: TRADE MISSION CENTER OF THE AMERICAS, INC.

DETACH AND SEND COMPLETED REGISTRATION PACKAGE TO:
THE JAY MALINA INTERNATIONAL TRADE CONSORTIUM [ITC] OF MIAMI-DADE COUNTY.
MAILING ADDRESS: 111 NW First Street, 25th Floor, Suite 2560, Miami, FL 33128. TEL: 305-375-5808; FAX: 305-679-7895.

IMPORTANT MISSION INFORMATION:

- REGISTRATION DEADLINE FOR THIS MISSION IS **AUGUST 1ST, 2007**. ITC WILL PROVIDE HOTEL & AIRLINE WITH NAMES OF PARTICIPANTS.
- **AFTER AUGUST 1ST, 2007, AIRFARE AND LODGING WILL BE CHARGED AT PREVAILING MARKET RATES AND MAYBE HIGHER.**
- **AFTER AUGUST 1ST, 2007, PARTICIPANTS WILL BE CHARGED AN ADDITIONAL \$200 FOR REGISTRATION.**
- AN ADDITIONAL **\$300** WILL BE CHARGED TO PARTICIPANTS ARRANGING THEIR OWN **LODGING AND/OR TRAVEL.**
- NUMBER OF PARTICIPANTS IS **LIMITED TO 15**, ON A **FIRST-COME-FIRST-SERVED BASIS**. **BEYOND 15 PARTICIPANTS** THE STATED RATES FOR LODGING AND AIRFARE **CANNOT** BE GUARANTEED.
- REGISTRATION FEE, HOTEL AND AIRFARE COSTS ARE **NON-REFUNDABLE AND NON-TRANSFERABLE** AFTER PAYMENT.
- PARTICIPANTS ARE RESPONSIBLE FOR **ALL MISSION COSTS** INCLUDING THE COSTS OF **IMMUNIZATIONS AND VISA.**

Your signing of this registration form binds you to all the terms and requirements of this mission. ITC reserves the right of cancellation and the right to change the mission program or itinerary on-site, based on unforeseen circumstances. Participants agrees, at all times and hereafter, to hold harmless and indemnify the ITC, TMC, its staff and board of Directors, contributing organizations, sponsors, agents, affiliates and volunteers from errors, omissions, or actions that may result from the ITC Mission to India from September 30 thru October 6, 2007.



PARTICIPANTS REGISTRATION FORM & PROFILE

PERSONAL INFORMATION

First Name: _____ Last Name: _____

[Name as it appears on your passport]

Address: _____

City: _____ State: _____ Zip Code: _____

Day Phone: _____ E-Mail: _____

Indicate Any Special Needs: _____

Passport Number: _____

ORGANIZATIONAL PROFILE

Name of Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____ Website: _____

Year Established: _____ Number of Employees: _____

AGENCY MISSION OR PURPOSE:

STATE YOUR PRIMARY OBJECTIVE FOR PARTICIPATING IN THIS MISSION:

INDICATE AGENCIES IN INDIA YOU WOULD LIKE TO MEET:

IMPORTANT!

Please attached a half-page biographical information and a recent passport-sized photograph.
This information will be used for the mission brochure.