

ACCOMMODATION CHECK LIST

Country: _____

Date Type of room Category	10/14 (Mon.)		10/15 (Tue.)		10/16 (Wed.)		10/17 (Thu.)		10/18 (Fri.)		10/19 (Sat.)		10/20 (Sun.)		10/21 (Mon.)		10/22 (Tue.)		10/23 (Wed.)		10/24 (Thu.)		10/25 (Fri.)		10/26 (Sat.)		10/27 (Sun.)		Total		③ No. of accompanying persons
	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S	Tw	S			
①	Official Delegate																														
	Technical Delegate																														
	Experts (incl: O.C.)																														
	Official Observers																														
	Honorary Members																														
	Guests																														
	Secretariat																														
②	Total																														
	Observers																														
	Sum total																														

Notes: (1) Tw = twin bed room / S = single bed room
 (2) Enter the necessary number of twin and single rooms for each date.
 (3) Use of twin rooms is limited to persons accompanied by family members.
 (4) The accompanying persons entered for the categories under ① are not to be counted as "Observers" under ②.
 (5) Enter the number of accompanying persons under ③.
 (6) Coordinators, interpreters, etc. are to be counted in "Secretariat".

JAPAN ORGANIZING COMMITTEE
FOR
INTERNATIONAL VOCATIONAL TRAINING COMPETITION

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