



**Form 1**

**5<sup>TH</sup> MEETING OF THE ACP MINISTERS IN CHARGE OF FISHERIES AND  
AQUACULTURE  
MELIA HOTEL, WEST BAY STREET  
NASSAU, BAHAMAS**

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**ACCEPTANCE FORM**

Please complete and return this form to [acpconferencebahamas@bahamas.gov.bs](mailto:acpconferencebahamas@bahamas.gov.bs).

**PLEASE COMPLETE AND RETURN TO ACP BAHAMAS BRANCH  
BY  
18<sup>th</sup> AUGUST, 2017**

I/We will be attending the 5<sup>th</sup> Meeting of the ACP Ministers in charge of Fisheries and Aquaculture West Bay Street, Nassau, Bahamas from 18<sup>th</sup> - 21<sup>st</sup> September, 2017 Yes \_\_\_\_\_ No \_\_\_\_\_.

Country .....

Date .....

Contact Name .....

Telephone Number .....

(including area and city codes)

Fax Number .....

Email .....

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**Bahamas ACP Secretariat**

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| Email: [acpconferencebahamas@bahamas.gov.bs](mailto:acpconferencebahamas@bahamas.gov.bs) |

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