The Participant Form serves and information tool to aid the BelizeINVEST Team (BELTRAIDE) to develop meeting itineraries for project- specific inbound investment visits and/or missions matching your development. Visistors from certain countries may require visas to enter Belize. For reservation purposes, hotels usually request the full names of their quests prior to booking.

Where visas are required, please be prepared to facilitate the BelizeINVEST Team (BELTRAIDE) with a scanned copy of your passport. BelizeINVEST (BELTRAIDE) is commited to ensure that your passport information remains highly confidential and will not be used for any other purpose, other than immigration-related facilitation.

The following form is intended to allow BelizeINVEST (BELTRAIDE) to foster its support services to your development interest where applicable. Kindly complete as thoroughly and legibly as possible in print or type. Please note that your technical responses and specific feedback will be kept confidential serving the sole purpose of advancing your development in the best way possible.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Primary Participant** | **(please fill where applicable)** | | | |
| **First Name**: | | **MI**: | | **Last Name**: |
| **Home Phone:** | | | **Nationality:** | |
| **Mobile Phone:** | | | **Skype ID:** | |
| **Email Address:** | | | **Passport Number:** | |
| **Professional Background:** | | | | |
| **Company/Organization:** | | | **Position :** | |
| **Objective:** | | | | |
| **How many additional participants will be attending?** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Participant 1** |  | | | |
| **First Name**: | | **MI**: | | **Last Name**: |
| **Contact Phone:** | | | **Nationality:** | |
| **Email Address:** | | | **Passport Number:** | |
| **Company/Organization:** | | | **Position:** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Participant 2** |  | | | |
| **First Name**: | | **MI**: | | **Last Name**: |
| **Contact Phone:** | | | **Nationality:** | |
| **Email Address:** | | | **Passport Number:** | |
| **Company/Organization:** | | | **Position:** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Participant 3** |  | | | |
| **First Name**: | | **MI**: | | **Last Name**: |
| **Contact Phone:** | | | **Nationality:** | |
| **Email Address:** | | | **Passport Number:** | |
| **Company/Organization:** | | | **Position:** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Participant 4** |  | | | |
| **First Name**: | | **MI**: | | **Last Name**: |
| **Contact Phone:** | | | **Nationality:** | |
| **Email Address:** | | | **Passport Number:** | |
| **Company/Organization:** | | | **Position:** | |

Date Completed:



**If extra contact information tables are need for additional participants, kindly notify personnel of the appropriate number of participants to update this form.**

Thank you for taking the time to complete this brief form. For further information or any follow-up details, kindly visit [www.belizeinvest.org.bz](http://www.belizeinvest.org.bz) or contact BelizeINVEST (BELTRAIDE) at +501-822-3737 or +501-822-0175.