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WHO TO ATTEND?

- Local Government Executive Leadership/ Senior Administrative Directors and Officers
- Mayors/ Senior Administrators Directors, Speakers of the Assembly, Councilors, Planning, Agribusiness, Budget, Engineering Officers of Regional, Municipal and District in the various portfolios within the Local Government Administration of Ghana
- Business leaders,
- Youth Leaders, of 15-20 years only.

****AGSCF shall be extremely grateful if you could kindly bring this vital information to the attention of all Local Government Service Technocrats in all Metropolitan, Municipal and District Assemblies and any other for their immediate action.**

Departure/Arrival:

By the schedule, all participating delegates should plan to depart Accra-Ghana on the 14th July, 2019 and arrive in Houston Texas USA 15th July 2019 and return back to Ghana on 21st July, 2019 (6 Night 5 Days total), inclusive of traveling time.

Due to the limited time available, we strongly advise that all interested participating delegates act swiftly to this notification to enable AGSCF see to your travel requirement at the earliest **especially those that will require applying for U.S. VISA, and all those that Sister Cities has already acquired U.S Visa for, are to do same.**

For the foregoing, as part of the registration process, all interested in attending the conference are to contact the Africa Global Sister Cities Foundation, coordinators of the programs in earnest. @

Tel/WhatsApp (024) 326-3000. Email : pkwamek@yahoo.com

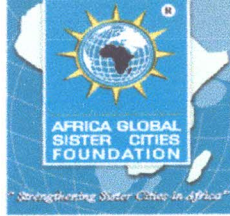
❖ **See total detail break down participating package fee as attached for your perusal**

We looking forward to helping you attend this conference.

Thank you.

Yours faithfully,

.....
Noah Agbele
Conference Administrator, AGSCF



13th May, 2019

Dear Sir/Madam,

BREAKDOWN COSTING OF THE CONFERENCE FEES

Please note the breakdown of the cost involved in regard to payment for the Sister Cities International Annual Conference in Houston, Texas-U.S.A.

<u>NAME OF COST CENTER</u>	<u>US \$</u>
• Full Conference Fees: For International Participant.	2,000.00
• Flight (Delta-Roundtrip, International with Domestic Routing) (could be cheaper on day of payment)	2,645.00
• Hotel Accommodation +Plus Tax (7nights @\$199)	1,393.00
• International Medical Comprehensive Travelling Insurance.	132.00
• Provision for Bank charges	140.00
• General Administrative (Refer to item 4 below)	600.00
Total	US\$ 6,910. 00

PLEASE NOTE THE FOLLOWING:

1. **Conference registration fees include:** All that is associated with conference-:
(City welcoming reception, food, China & Africa Summit, annual award dinner, plenary event, closing banquet travelling, snacks, coffee break, lunch, conference materials, facilitation fees and all others that goes into the organization of the Conference.
Including bank charges: swift, intermediary and 1-1.5% Charge on the face value of the amount remitted depending on the bank.)
2. **Hotel accommodation:** The facility has the perfect blend of exceptional service, convenience and modern style year-round at Houston. The accepted chosen Conference hotels are located in downtown Houston, Texas, and are connected by skywalk to the George R. Brown Convention Center. Settle into spacious guest rooms and suites with pool, park or city views, Wi-Fi, mini bar and deluxe amenities. Take a dip in our infinity pool or the world's largest Texas-shaped rooftop lazy river. Look and feel your best with our full-service spa and modern fitness center. Satisfy your palate with myriad dining options, including Baggio's Sports Bar, Walker Street Kitchen and Cueva Wine Bar. Our convention center hotel boasts 150,000 square feet of elegant event space, featuring a grand ballroom, meeting rooms, a rooftop terrace and outdoor pavilion. Access Houston attractions, from the theater district to high-end shopping, via the METRORail lines. Enjoy a rewarding stay at our downtown Houston hotel. Rate is inclusive all taxes. **See hotel image below.**

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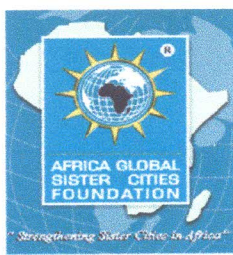
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3. **Delta airlines:** is the preferred chosen American Airline that flies direct to the United States from Kotoka International Airport. and has its own domestic routing to Houston Texas. Airfare must be paid now to avoid booking cancelation.
4. **Administrative:** Representing general secretarial administrative coordinating duties & processing of all Participating delegate documentation. (Helping in U.S Visa acquisition) etc,
5. **PAYMENT-:** All payment towards this stated conference should be strictly made to: **Africa Global Sister Cities Foundation** in US\$. only and receipt issued for payment. This dealing will be strictly on individual or recognized institutional basis only.
6. All Interested officials that wish AGSF to assist them in processing their United States Visas, should first pay their required **Visa Application Fees** at the approve GT Bank & bring the generated code number to us for the filling of once application forms online.
7. **CLOSING DATE:** With the strict rule that we are operating under coupled with the limited time frame, we are advising that, all interested participants should act in earnest to avoid in the processing by **Friday, 21st June, 2019.**


.....
Noah Agbele
Administrator, AGSCF


MARRIOTT GRAND Marquis Houston





13th May, 2019

2019 Sister Cities International Annual Conference Registration

Policies

Please kindly note below the following terms and conditions governing the 2019 Sister Cities International Annual Conference to be held from the 15th – 20th July, 2019 in Houston, Texas, U.S.A; As directed by SCI to be strictly complied with.

1. General Registration Policies

- Registration for the conference will close **Friday, July 5th, 2019 at 11:59 PM EDT.**
- The registration and cancellation deadline for the Youth Leadership Summit is **12pm EDT Monday, June 24th, 2019.**
- **Full payment must accompany registration. A delegate will only be recognized as a participating delegate if he or she complete the registration process and pay in full by credit/debit card, bank transfers or any other means of receivables.**
- All interested delegates outside the United States that wish to pay by check or wire transfer, should do so through SCI official in-country coordinating representative- (**In Ghana-AGCSF**), so that Sister Cities International can track the payment. **Once payment is received, Sister Cities International will register the delegate and provide a confirmation number via the email address provided.** Please note, all information must be filled out completely for the delegate to be registered.

2. Cancellation Policy

- No refunds will be issued for optional items such as tours and/or individual ticketed events such as the City Welcome Reception, and Annual Awards Dinner. No refunds will be given for the \$25.00 wire transfer processing fee.
- You may request a refund for the Annual Conference registration through your SCI in-country local representative in writing to Sister Cities International by **Monday, July 1st, 2019 at 11:59 PM EDT.** Refunds will be processed within **30 days** of the request. If a request is not sent by **Monday, July 1st, 2019**, no refund will be issued. All cancellations include a **\$125** cancellation and any other fee per registrant. Please note in advance.
- You may request a refund for the Youth Leadership Summit under the same condition as stated above by **Monday, June 24th, 2019 at 11:59 PM EDT.**
- No partial refunds will be made if the delegate decides not to attend particular meetings, sessions or events.
- Purchases by credit card will be credited back to the credit card. Purchases via check will be refunded via check. Purchases by wire transfer will be refunded via wire transfer, with any banking fees borne by registrant.

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- Registration substitutions can be made by notifying Sister Cities International in writing by **Thursday, June 27th, 2019**.
- **In the event that the Annual Conference, Youth Leadership Summit, Diplomatic Gala, or other special events are cancelled by Sister Cities International, all registrants will be reimbursed for 100% of the registration fee. In the event of a cancellation, Sister Cities International will not reimburse for forgone transportation costs, including but not limited to: hotel expenses, meal expenses, and airfare and any other legitimate expenses.**

3. Visa and Cancellation Policy for International Delegates

- To receive an invitation letter for visa processing a written request must be sent to **conference@sistercities.org** by **Monday, June 24th, 2019 at 11:59 PM EDT**. Sister Cities International will only issue an invitation letter if the full registration payment has been received including the \$25.00 wire transfer processing fee and registration form duly. Obtaining a visa can be a lengthy process, Sister Cities International advises delegates to start the process at least **6-12 weeks** in advance of the conference.
- **If an international delegate's visa application is denied they may request a full refund for the Annual Conference, however the request must be accompanied by an official embassy letter/document that shows the visa application was denied.** If the delegate paid by wire transfer, the refund will be issued using the wire details provided on the offline registration form. If a completed offline registration form is not sent to **conference@sistercities.org** by **Monday, July 1st, 2019 at 11:59 PM EDT**, a refund will not be issued. If Sister Cities International has not received the denial letter by **Monday, July 1st, 2019**, a \$125 cancellation plus any other identified legitimate fee such as Hotel bank charges etc. fee will be applied.

Signed

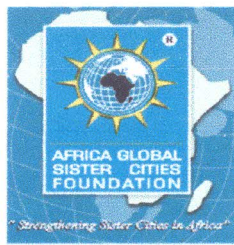
Noah Agbele
Conference Administrator, AGSCF

NOTE:

I, Of

do hereby agree to abide by the terms and conditions expressed as stated in this binding document by Africa Global Sister Cities Foundation in reference to my participation in the 2019 SCI Annual Conference in Houston, Texas, USA

Signature: **Date:**.....



Videomart Building
11 Ringway Link. S. 1, Ringway Estates
P. O. Box AN 5237, Accra-North, Ghana

Tel: [+233 (24)326-3000 / (302) 226-239]
pkwamek@yahoo.com / info@africaone.net
Website: www.africaone.net

An African Citizen Diplomacy People To People Developmental Service NGO

GENERAL INFORMATION OF DELEGATE INTENDED TO PARTICIPATE IN THE UPCOMING SISTER CITIES PROGRAM IN THE UNITED STATES OF AMERICA, JULY 2019

Please, you are required to provide us with the under mentioned information to be used to fill all your relevant forms for submissions, i.e., US Visa application, Conference Registration, Hotel Booking, Traveling Insurance etc. if we are to do them on your behalf...

- 1 Name in full as provided in Passport: _____
Other Names Used: _____
- 2 Sex: MALE / FEMALE
- 3 Marital Status: _____
- 4 Date of Birth: _____
- 5 Place of Birth: _____
- 6 Country/Region of Origin (Nationality): GHANA
- 7 Do you hold or have you held any nationality other than the one indicated above on nationality? ____
- 8 Home Address: _____
- 9 City: _____
- 10 State/Province: _____
- 11 Postal Zone/ZIP Code: 00233
- 12 Country/Region: GHANA
- 13 Same Mailing Address? YES / NO. If NO, Kindly answer NO. 19
- 14 Mailing Address: _____
- 15 City: _____
- 16 State/Province: _____

- 17 Postal Zone/ZIP Code: 00233
- 18 Country/Region: GHANA
- 19 Primary Phone Number: _____
- 20 Secondary Phone Number: DOES NOT APPLY
- 21 Work Phone Number: _____
- 22 Email Address: _____
- 23 Passport/Travel Document Type: REGULAR / IRREGULAR

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SisterCities
INTERNATIONAL
Connect globally. Thrive locally.

- 24 Passport/Travel Document Number: _____
- 25 Passport Book Number: DOES NOT APPLY
- 26 Country/Authority that Issued Passport/Travel Document: GHANA
- 27 City Where Issued: ACCRA
- 28 State/Province Where Issued: GREATER ACCRA
- 29 Country/Region Where Issued: GHANA
- 30 Issuance Date: _____
- 31 Expiration Date: _____
- 32 Have you ever lost a passport or had one stolen? YES/ NO _____
- 33 If Yes, kindly provide Passport Number _____

TRAVEL INFORMATION

1. The List of Purposes of Trip to the U.S.
2. Purpose of Trip to the U.S. (1): TEMP. BUSINESS PLEASURE VISITOR (B)
3. Specify: BUSINESS & TOURISM (TEMPORARY VISITOR) (B1/B2)
4. Have you made specific travel plans? NO
5. Intended Date of Arrival: _____
6. Intended Length of Stay in U.S.: _____
7. Address where you will stay in the _____
8. City, State, Postal/Zip Code: _____
9. Person/Entity Paying for Your Trip: _____
10. Are there other persons traveling with you? NO
11. Have you ever been in the U.S.? YES /NO _____, if Yes, kindly answer 12
12. What was your date of arrival and departure?

13. Have you ever been issued a U.S. visa? NO
14. Have you ever been refused a U.S. Visa, or been refused admission to the United States, or withdrawn your application for admission at the port of entry? YES/ NO _____,
if Yes, kindly state reasons _____

15. Has anyone ever filed an immigrant petition on your behalf with the United States Citizenship and Immigration Services? YES/NO _____

U.S. Contact Information

- 1. Contact Person Name in the U.S.: _____ To be fill by AGSCF
- 2. Organization Name in the U.S.: _____ Same
- 3. Relationship to You: _____ Same
- 4. U.S. Contact Address: _____ Same
- 5. Phone Number: _____ Same
- 6. Email Address: _____ Same

Family Information

- 1, Father's Surnames: _____
- 2. Father's Given Names: _____
- 3. other's Date of Birth: _____
- 4. Is your father in the U.S.? YES/ NO
- 5. Mother's Surnames: _____
- 6. Mother's Given Names: _____
- 7. Mother's Date of Birth: _____
- 8. Is your mother in the U.S.? _____
- 9. Do you have any immediate relatives, not including parents in the U.S.? _____
- 10. Do you have any other relatives in the United States? YES / NO
- 11. Spouse's Full Name: _____
- 12. Spouse's Date of Birth: _____
- 13. Spouse's Country/Region of Origin (Nationality): _____
- 14. Spouse's City of Birth: _____
- 15. Spouse's Country/Region of Birth: _____
- 16. Spouse's Address: _____

WORK/EDUCATION/TRAINING INFORMATION

- 1. Primary Occupation: _____
- 2. Present Employer or School Name: _____
 - Position in Current Employment _____
- 3. Address: _____
- 4. City: _____

5. State/Province: _____

6. Postal Zone/Zip Code: 00233

7. Country/Region: GHANA

Work Phone Number: _____

8. work Phone No. _____

9. Monthly Salary in Local Currency (if employed): _____

10. Date of Employment _____

10. Briefly Describe your Duties: _____

IMMEDIATE PAST EMPLOYMENT, IF ANY

1. Were you previously employed? YES/ NO _____,

2. IF YES, KINDLY PROVIDE THE FOLLOWING,

- NAME OF EMPLOYER/COMPANY _____
- Position in Company _____
- Briefly describe your duties _____

- ADDRESS _____
- Date of Start work _____
- Date of End work _____
- Supervisor's Name _____
- Supervisor's Contact _____

EDUCATION

1. Have you attended any educational institutions at a secondary level or above? YES

2. Name of Institution (1): _____

3. Address of Institution: _____

4. City: _____

5. State/Province: _____

6. Postal Zone/ZIP Code: 00233

7. Country/Region: GHANA

8. Course of Study: _____

9. Date of Attendance From: _____

10. Date of Attendance To: _____

11. Do you belong to a clan or tribe? YES

Clan or Tribe Name: _____

12. Provide a List of Languages You Speak:

Language Name (s): _____

13. Have you traveled to any countries within the last five years? YES/ NO _____, if YES, provide countries below

Country/Region Visited (1): _____

Country/Region Visited (2): _____

Country/Region Visited (3): _____

Country/Region Visited (4): _____

Country/Region Visited (5): _____

Country/Region Visited (6): _____

Have you belonged to, contributed to, or worked for any professional, social, or charitable organization? YES/ NO _____

Do you have any specialized skills or training, including firearms, explosives, nuclear, biological, or chemical experience? YES/ NO _____

Have you ever served in the military? YES/ NO _____

Have you ever served in, been a member of, or been involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? YES/ NO _____

1. **SECURITY AND BACKGROUND INFORMATION**

Do you have a communicable disease of public health significance? (Communicable diseases of public significance include cancrroid, gonorrhea, granuloma inguinal, infectious leprosy, lymphogranulomavenereum, infectious stage syphilis, active tuberculosis, and others diseases as determined by the Department of Health and Human Services.) NO

Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of yourself or others? YES/ NO _____

2. Are you or have you ever been a drug abuser or addict? NO

3. Have you ever been arrested or convicted for any offense or crime, even though subject of a pardon, amnesty, or other similar action? NO
4. Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances? NO
5. Are you coming to the United States to engage in prostitution or unlawful commercialized vice or have you been engaged in prostitution or procuring prostitutes within the past 10 years? NO
6. Have you ever been involved in, or do you seek to engage in, money laundering? NO
7. Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the United States? NO
8. Are you the spouse, son, or daughter of an individual who has committed or conspired to commit a human trafficking offense in the United States or outside the United States and have you within the last five years, knowingly benefited from the trafficking activities? NO
9. Have you knowingly aided, abetted, assisted or colluded with an individual who has committed or conspired to commit a severe human trafficking offense in the United States or outside the United States? NO
10. Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States? NO
Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities? NO
11. Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations? NO
12. Are you a member or representative of a terrorist organization? NO
13. Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide? NO
14. Have you ever committed, ordered, incited, assisted, or otherwise participated in torture? NO
15. Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence? NO
16. Have you ever engaged in the recruitment or the use of the child soldiers? NO
17. Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? NO
18. Have you ever been directly involved in the establishment or enforcement of the population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free will? NO
19. Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue? NO
20. Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any other United States immigration benefit by fraud or willful misrepresentation or other unlawful means? NO
21. Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court? NO

22. Have you voted in the United States in violation of any law or regulation? NO
Have you ever renounced United States citizenship for the purpose of avoiding taxation? NO
Location Information Location where you will be submitting your application
Current Location: **ACCRA, GHANA**

Preparer of Application

Did anyone assist you in filling out this application? NO +
Your Personal Copy -- Do Not Bring to Interview
You electronically signed your application on 22-Jul-2014 04:33:57. You were required to electronically sign your application yourself, unless otherwise exempt by regulation, even if the application was prepared by someone other than yourself. Your electronic signature certifies that you have read and understood the questions in this application and that your answers are true and correct to the best of your knowledge and belief. The submission of an application containing any false or misleading statements may result in the permanent refusal of a visa or the denial of entry into the United States. All declarations made in this application are unsworn declarations made under penalty of perjury. (28 U.S.C. 1746).

The information that you have provided in your application and other information submitted with your application may be accessible to other government agencies having statutory or other lawful authority to use such information, including for law enforcement and immigration law enforcement purposes. The photograph that you provide with your application may be used for employment verification or other U.S. law purposes.