



UNITED NATIONS OFFICE AT GENEVA

Conference Registration Form

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Title of the Conference

Date 12-13 May 2011

4th Session of the UNECE Team of Specialists on Innovation and Competitiveness Policies (TOS-ICP)

Delegation/Participant of Country, Organization or Agency

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Participant

Mr. <input type="checkbox"/>	Family Name	First Name
Mrs. <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Ms. <input type="checkbox"/>		

Participation Category

<u>Head of Delegation</u> <input type="checkbox"/>	Are you based in Geneva as a representative of your permanent mission ? YES NO (delete non applicable)	Observer Organization <input type="checkbox"/>
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Permanent Official Address

Address in Geneva

Accompanied by Spouse Yes No

Family Name (Spouse) <input type="text"/>	First Name (Spouse) <input type="text"/>
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On Issue of ID Card Participant Signature Spouse Signature Date	Participant photograph if form is sent in advance of the conference date. Please PRINT your name on the reverse side of the photograph	Spouse photograph if form is sent in advance of the conference date. Please PRINT your name on the reverse side of the photograph	Security Use Only Card N°. Issued Initials, UN Official
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