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UNITED NATIONS OFFICE AT GENEVA

Meeting Registration Form Please Print

Date _____

Title of the meeting

52nd plenary session of the Conference of European Statisticians, 8-10 June 2004, Paris

Delegation of (country) or Organization

Participant

Mr. Family Name _____ First Name(s) _____
Ms. _____
Miss

Participation Category

Head of delegation	<input type="checkbox"/>	Observer (organization)	<input type="checkbox"/>
Delegation member	<input type="checkbox"/>	NGO	<input type="checkbox"/>
Observer (country)	<input type="checkbox"/>	Other (Please specify below)	<input type="checkbox"/>

Participating From / Until			
From	_____	Until	_____

Official occupation (in own country)

Passport or ID Number

Valid Until

Official telephone N°.

Fax N°.

E-mail address

Permanent Official Address

Address in Paris

Accompanied by Spouse Yes No

Family Name (Spouse)

First Name (Spouse)

On Issue of ID Card

Participant Signature

Spouse Signature

Date

Security Use Only

Card N°. Issued

Initials, UN Official