



UNITED NATIONS OFFICE AT GENEVA

- Conference Registration Form

Please print and return this form to the APLC Secretariat at facsimile no. (+41 22) 917 00 34

Title of the Conference

Date _____

Delegation/Participant of Country, Organization or Agency

Participant

MR.

Family Name

First Name

Mrs.

Ms.

Participation Category

Head of Delegation Member

Delegation Member

Observer Country

...

Are you based in Geneva as a representative of your permanent mission ?
YES NO (delete non

Observer Organization

NGO (ECOSOC Accred.)

Other (Please Specify Below)

Participating From / Until

From

Until

Document Language Preference

English

French

Other _____

Official Occupation (in own country)

Passport or ID Number

Valid Until

Official Telephone N°.

Fax N°.

E-mail Address

Permanent Official Address

Address in Geneva

Accompanied by Spouse

Yes

No

Family Name (Spouse)

First Name (Spouse)

On Issue of ID Card

Participant Signature

Spouse Signature

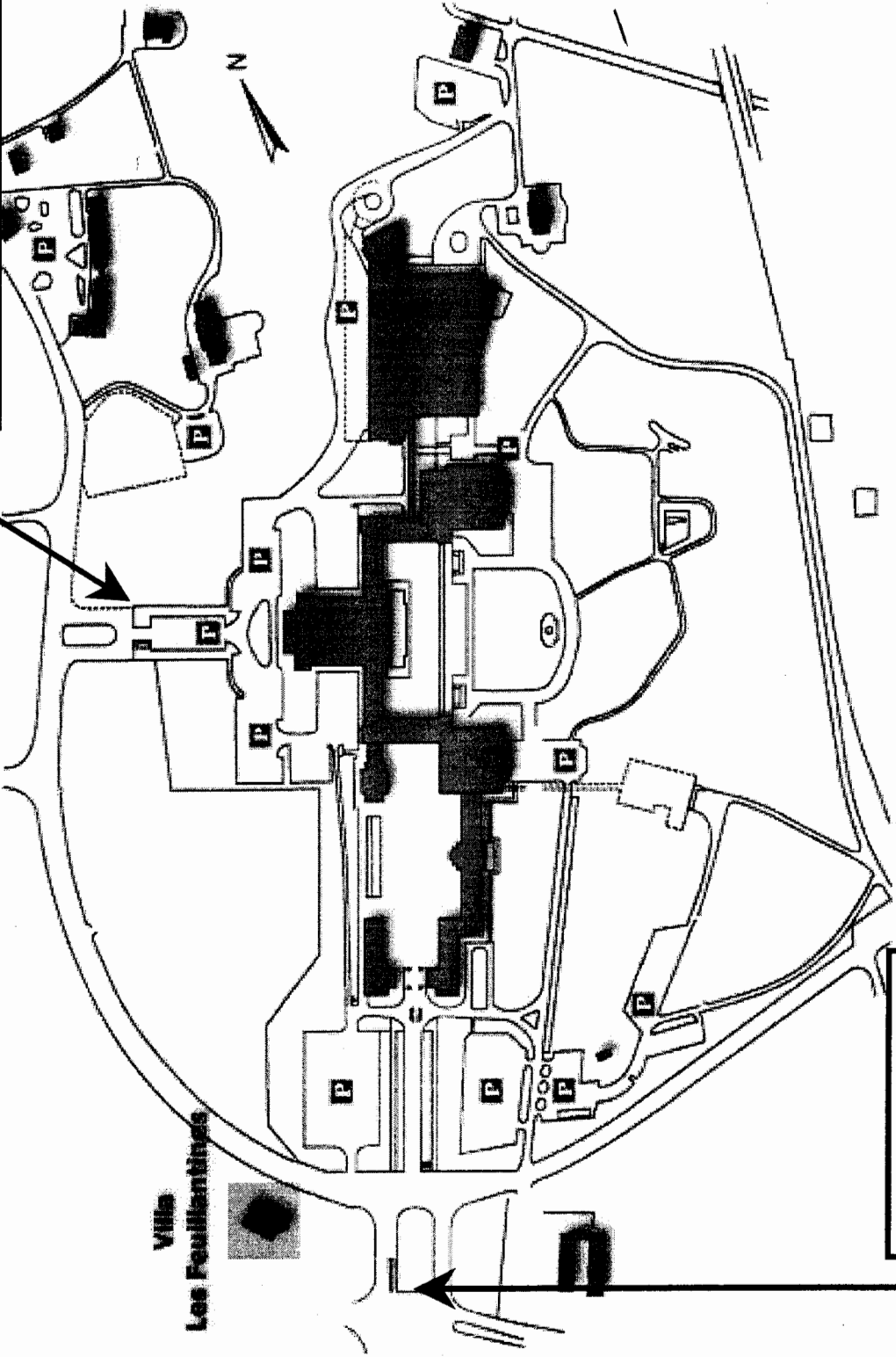
Date

Security Use Only

Card N° Issued

Initials, UN Official

Pregny Gate
Security and Safety Section,
Pass and Identification Unit



Villa
Les Feuillantes

Place des Nations