



20th session of the UN/CEFACT
On Thursday, 10 (starting at 10:00 hrs) and Friday, 11 April 2014
Salle XXIII (E building), Palais des Nations in Geneva

REGISTRATION FORM

Participant Mr. / Ms.	Family Name	First Name
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I AM REPRESENTING I am HoD <input type="checkbox"/> I am nominated by my HoD <input type="checkbox"/> I am NOT nominated by my HoD <input type="checkbox"/>					
the Government of:					
Intergovernmental Organization (IGO)		United Nations Organization		Non-Governmental Organization (NGO) (ECOSOC accredited)	
Chamber of Commerce		Private Sector		NGO (not ECOSOC accredited)	
NAME Government/Organization/Enterprise:			TITLE in Government/Organization/Enterprise:		
Official Tel. No.: +			Fax: +		
E-mail:			URL:		
Postal Address:					
City:		Postal Code:		Country:	
Address in Geneva:					
Do you need assistance with your visa? Yes <input type="checkbox"/> No <input type="checkbox"/>					
If yes, please e-mail a scanned, readable copy of your passport, including the page indicating the expiry date/last renewal together with your registration form, before Friday 14 March 2014.					

On Issue of ID Card Participant Signature <input type="text"/> Spouse Signature <input type="text"/> Date <input type="text"/>	Participant photograph if form is sent in advance of the conference date. Please PRINT your name on the reverse side of the photograph	PLEASE NOTE ONLY CERTAIN CONFERENCES REQUIRE A PHOTO, IF YOU ARE NOT ASKED TO PROVIDE ONE BY THE CONFERENCE STAFF YOUR CONFERENCE IS NON PHOTO	Security Use Only Card N° Issued <input type="text"/> Initials, UN Official <input type="text"/>
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