**REGISTRATION FORM**

**Joint UNECE/Eurostat Work Session on Statistical Data Confidentiality**

(Ottawa, Canada, 28-30 October 2013)

This form should be completed by each participant and returned **by 2 September 2013 to:**

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| Ms Diane Serikoff  [diane.serikoff@unece.org](mailto:diane.serikoff@unece.org)  Tel: +4122 917-2241 |

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| --- | --- | --- |
| 1. Surname (Family name): | Mr. □  Ms. □ | 2. First name: |
| 3. Representing (country or organization): | | |
| 4. Official function (in home country): | | |
| 5. Mailing address: | | |
| 6. Tel. No.: | | |
| 7. E-mail address: | | |
| 8. Please indicate topic ((i)-(v)) and title, if you intend to present a paper: | | |
| 9. Special requirements: | | |

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_