



Regional TIR SEMINAR

Hotel Inter-Continental

Amman (Jordan)

31 October - 1 November 2000

TIR SEMINAR REGISTRATION FORM

To be sent to (as soon as possible):

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Participant:

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(Mr., Mrs., Ms.) Title Family Name First Name

Official occupation in the Organization or Agency

Official address

Official telephone Fax E-mail

Please fill-in a separate form for each individual participants.
Feel free to copy this form in case of several participants attending the Seminar.