TIR SEMINAR REGISTRATION FORM

To be sent to (as soon as possible):

TIR SECRETARIAT

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Participant:

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<tr>
<th>Organization or Agency</th>
<th>Country</th>
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<thead>
<tr>
<th>(Mr., Mrs., Ms.)</th>
<th>Title</th>
<th>Family Name</th>
<th>First Name</th>
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Official occupation in the Organization or Agency

Official address

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<th>Official telephone</th>
<th>Fax</th>
<th>E-mail</th>
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Please fill-in a separate form for each individual participant.
Feel free to copy this form in case of several participants attending the Seminar.