

Parliamentary Hearing at the United Nations



14-15 November 2013 United Nations Headquarters New York

REGISTRATION FORM

PLEASE FILL OUT A SEPARATE FORM FOR $\underline{\mathsf{EACH}}$ PARTICIPANT

Submit all forms to the IPU New York office by either fax or email:

Fax: +1 212 557 3954; E-mail: ny-office@ipu.org

Ms. [□ Mr. □	First Name:			
Last Name:					
Name Parlia Chan	ament/				
Cour	ntry:				
Member of parliament: \square Senator: \square Aide or staff person: \square					
Full title:					
Check this box if you are the head of delegation to the meeting: \Box					
Participant's direct e-mail address ¹					
Personal e-mail:					
Office e-mail:					
[For parliamentarians only]					
Please list up to three parliamentary committees to which you belong					
1.					
2.					
3.					

This information will be used to provide each individual participant with a copy of the final report of the meeting. Participants will also be registered to receive the IPU eBulletin, an electronic newsletter that provides information on IPU activities around the world.