|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **REGISTRATION FORM** | | | | | | | |
| Please fill in your name and complete address, telephone and telefax numbers as well as e-mail address (in block capitals, please) | | | | | | | |
| Name |  | | | | | | |
| Head of Delegation |  | | Delegate | |  | Other |  |
| Country/Observer |  | | | | | | |
| Complete address |  | | | | | | |
|  | | | | | | |
|  | | | | | | |
|  | | | | | | |
|  | | | | | | |
| Telephone |  | | | | | | |
| Telefax |  | | | | | | |
| E-mail |  | | | | | | |
| Date of Arrival |  | | | | | | |
| Date of Departure |  | | | | | | |
|  |  | | | | | | |
| **Please, return** the completed form with a copy to the organizer latest by: 14.01.13 | | | | | | | |
| **HELCOM Secretariat:**  **Minna Pyhälä**  **minna.pyhala@helcom.fi**  **Fax: +358 (0) 207 412 645** | |  | |  | | | |
|  | |  | | | |