**CIPAC/FAO/WHO 2024 Meetings in Wageningen, the Netherlands**

**REGISTRATION** **FORM**

|  |  |
| --- | --- |
| Mr./Ms. | Mr. Ms. Other |
| Title |  |
| First Name |  |
| Last Name |  |
| Organisation |  |
| Country |  | Postal code |  |
| Street No. |  |
| Street |  |
| City |  |
| Phone |  | Fax |  |
| E-mail |  |
| **Accompanying** **private** **person(s)** |
| First Name | – |
| Last Name | – |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Attendance at the | Joint Open Meeting |  | Excursion |  | Technical meeting |  |

**Symposium** **Registration** **on** **18th** **June,** **2024** **(**130,00e**)**

Attendance: Yes No

Title and Author(s) of Presentation1:

Date: Signature: