

Nomination form for the African regional meeting on the
Biosafety Clearing-House and the Clearing-House Mechanism
26-28 February 2001, Nairobi, Kenya

This form must be returned to the CBD Secretariat before Friday, 2 February 2001
Please return by fax to +1 514 288-6588

Participant details:

Family Name:	First Name:
Title (Mr / Ms / Dr / etc.):	Sex:
Job title:	Employer:
Address for correspondence:	
Telephone number (business hours):	Telephone number (after hours):
Facsimile number:	E-mail address:
Areas of expertise (please indicate any that apply): Biosafety regulation / Clearing-House Mechanism / Information-sharing / Other (please specify):	

To be completed by the CBD National Focal Point making the nomination:

Nominated by Government of: _____

Name of CBD National Focal Point: _____

Signature of Focal Point: _____ Date: _____

Please return completed form to:

Secretariat of the Convention on Biological Diversity
World Trade Center
393 Saint-Jacques Street, Suite 300
Montreal, Quebec, H2Y-1N9, Canada

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