

INFORMAL CONSULTATIONS ON THE RESUMED EXCOP  
REGARDING A BIOSAFETY PROTOCOL  
VIENNA, AUSTRIA, 15 – 19 SEPTEMBER 1999

Pre-Registration Form (Please print)

☐ Mr. / ☐ Mrs. / ☐ Ms. / ☐ Amb. / ☐ Dr. / ☐ Prof.

FAMILY NAME: \_\_\_\_\_

First name: \_\_\_\_\_

Representing:

☐ GOVERNMENT : \_\_\_\_\_

Ministry/department/agency : \_\_\_\_\_

Official

Address : \_\_\_\_\_

\_\_\_\_\_

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Fax : + (\_\_\_\_) \_\_\_\_\_

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E-MAIL : \_\_\_\_\_

URL: \_\_\_\_\_

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Please return duly filled by 31 August 1999 to :

Secretariat of the Convention on Biological Diversity  
World Trade Center  
393 Saint-Jacques St., Suite 300  
Montreal, Quebec, Canada  
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Fax : + 1 (514) 288-6588  
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