



**CONFERENCE REGISTRATION FORM**

**STANDING COMMITTEE  
44<sup>TH</sup> MEETING**

**3 – 5 MARCH 2009  
ROOM XIX - PALAIS DES NATIONS**

COUNTRY/ORGANIZATION:

FAMILY NAME:

MR.  MRS.  MS.

FIRST NAME:

OFFICIAL TITLE:

PASSPORT OR ID NUMBER:

VALID UNTIL:

**THIS FORM MUST BE COMPLETED BY ALL DELEGATES  
NOT IN POSSESSION OF A UN BADGE**

**PLEASE FAX TO THE EXCOM SECRETARIAT (41.22) 739.73.48  
OR BY EMAIL (HQEXCOM@UNHCR.ORG)  
NO LATER THAN FRIDAY 27 FEBRUARY 2009**