

ANNEX 1

REGISTRATION FORM – ISC MEETING 2023, MALMÖ SWEDEN

To be sent by e-mail only, to: elisabet.mikaelsson@icloud.com

Function:	Delegate Alternate Delegate Official Observer Accompanying Person
NAC:	
Full name:	
E-mail:	
Phone No:	
Full stay:	Single Room Double Room Twin Room
Plenary only:	Single Room Double Room Twin Room
Share room with:	