 Appendix B

REGISTRATION FORM

**Autumn Meeting of OSCE Parliamentary Assembly**

**Skopje, 29 September – 2 October 2016**

*Each delegation is kindly asked to complete this form and return it* ***no later than 26 August 2016*** *to:*

|  |  |
| --- | --- |
| Ms. Odile Lelarge Fax: (+45) 33 37 80 30**E-Mail:** odile@oscepa.dk | Ms. Biljana OgnenovskaFax: (+389) 2 3135 401 E-mail: b.ognenovska@sobranie.mk   |

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| --- | --- |
| Country or organization :  |  |
| Contact Person : |  |
| Telephone : |  |
| Fax : |  |
| E-mail : |  |
| Hotel in Skopje: |  |

# Delegation registration

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| Last name, First name, Mr./ Ms. | Title(s)*Speaker of the Parliament, Vice-President, Head / Member of delegation, Secretary of delegation, etc…* | Standing Committee(x) | Accompaniedby : | Arrivaldate | Time | FlightN° | Depart.date | Time | FlightN° |
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# Delegation registration

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| Last name, First name, Mr./ Ms. | Title(s)*Speaker of the Parliament, Vice-President, Head / Member of delegation, Secretary of delegation, etc…* | Standing Committee(x) | Accompaniedby : | Arrivaldate | Time | FlightN° | Depart.date | Time | FlightN° |
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