

**Roundtable on the Reconstruction of Haiti's
Telecommunications Sector**



Bridgetown, Barbados, 29-30 June 2010

Registration Form

(CAPITAL LETTERS)

NAME

Mr. ☐ / Mrs. ☐ / Ms. ☐

(family name)

(first name)

Title

REPRESENTATION

☐ ITU Member State Country

☐ Head of delegation ☐ Deputy Head of delegation ☐ Delegate

(To be completed by representatives of Member States only)

☐ ITU Sector Member Name

☐ Other Organisation or Institution Name

OFFICIAL ADDRESS

Name of the Administration, Organization or Entity

Street

City/Code/Country

Tel.: Fax: E-Mail:

Date:

Signature:

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