

International Conference Registration Form

Population, Health, and Environment (PHE): Integrated Development for East Africa

November 14-16, 2007

United Nations Conference Centre | Addis Ababa, Ethiopia

Yes! I will participate!

Name: Mr. Ms. Dr. _____
Last name (family names) First name (given names)

Job title: _____

Organization/Employer: _____

Postal Address: _____

Tel: _____ Fax: _____

Mobile phone no.: _____ E-mail: _____

Post-conference field visit (Saturday, November 17, 2007):

*Please note: There will be a \$20 fee to participate in the field visit, payable at conference check-in.

- YES, I am interested. Please send me more information.
- No, I will not participate.

Food preference:

Are you vegetarian? _____ Do you have any food allergies? _____

Will you submit an abstract to present an integrated project or research results during a poster session?

- Yes
- No

*Please note: Limited funding for travel expenses is available to support East African residents to participate in the conference. When submitting an abstract or project description, please indicate whether you require financial support in order to participate. Funding is not guaranteed to everyone who is selected to present a poster at the conference.

Participant's Signature _____ Date: _____

E-mail or fax your registration form to:

Michela Marazzani

Conference Logistics Coordinator

Tel: +251 (0)11-662 70 74/75

+251 (0)911-22 16 37

E-mail: michelamarazzani@yahoo.com

Fax: +251-116626949 or +251-114339655

For conference program inquiries, please contact:

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