

MEMBER STATES

**ASIAN-AFRICAN LEGAL CONSULTATIVE ORGANIZATION (AALCO)
FIFTY-THIRD ANNUAL SESSION
15th – 18th SEPTEMBER 2014
TEHRAN, ISLAMIC REPUBLIC OF IRAN**

REGISTRATION FORM

Please complete in capital letters:

NAME: _____
Surname First Middle

PASSPORT NUMBER _____

COUNTRY _____

TITLE _____

STATUS HEAD OF DELEGATION _____

ALTERNATE MEMBER _____

ADVISER/MEMBER _____

PERMANENT MAILING ADDRESS _____

E-Mail _____

Fax No. _____

Telephone No. _____

SIGNATURE

**OBSERVER STATES/
INTERNATIONAL ORGANISATIONS**

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ORGANIZATION _____

DESIGNATION _____

PERMANENT ADDRESS _____

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Fax No. _____

SIGNATURE