**REGISTRATION FORM**

**TENTH (10TH) REGIONAL SEASONAL FORECASTING FORUM FOR THE SOUTH WEST INDIAN OCEAN REGION (SWIOCOF-10)**

**(SEPTEMBER 23, 2021)**

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| 1. | COUNTRY : |  |
| 2. | DEPARTMENT OR ORGANISATION : |  |
| 3. | LAST NAME (Dr/Mr/Ms) : | |
| 4. | FIRST NAME : |  |
| 5. | POSITION : |  |
| 6. | PROFESSIONAL ADDRESS : |  |
| 7. | CITY : |  |
| 8. | TELEPHONE : |  |
| 9. | MOBILE : |  |
| 10. | EMAIL : |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date : | | | Signature : | | |
|  |  |  |  |  |  |

To be returned to Nathalie SEVATHIAN : nathalie.sevathian@coi-ioc.org

Indian Ocean Commission