

REGISTRATION FORM

for the matchmaking event for establishment and development of bilateral partnerships for implementation of projects within the Programme SK-Climate to be held on 29 October 2019 in Oslo, Norway

Identification data of the applying institution

Municipality <i>(official name)</i> :	
Official address:	
Identification number:	
Statutory representative:	

Identification data of the nominated participants

Nominated participant # 1	
Name and surname:	
Position:	
Organisational unit:	
Tel:	
Mob:	
Email:	
Nominated participant # 2*	
Name and surname:	
Position:	
Organisational unit:	
Tel:	
Mob:	
Email:	

Justification of the interest to participate at the event

(Please briefly describe why the municipality would like to participate at the event)

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* Nomination of the second participant is not obligatory. The costs of the second nominated participant will be reimbursed by the Programme Operator only in case of remaining financial allocation.

Possibilities for future cooperation (Please briefly describe possibilities of the municipality for future cooperation with the donor states within the activities aimed action plans and measures for mitigation and adaptation implemented by local authorities in urban areas of the Programme SK-Climate: Outcome 1: Increased climate change resilience and responsiveness within targeted areas; Output 1.1: Action plans for mitigation and adaptation implemented by local authorities in urban areas.)
Declaration
By submitting this registration form, I, the statutory representative of the municipality, hereby declare that <ul style="list-style-type: none">- the information and data in this registration form are true and correct;- the nominated participant/participants have sufficient knowledge of the English language at an independent user level in order to present the activities and measures of the municipality planned to be implemented within the Programme SK-Climate and establish potential partnerships with the participants from the donor states;- the municipality will pre-finance the participation costs of the nominated participant/s and I acknowledge that the costs of the second nominated participant, if relevant, will be reimbursed by the Programme Operator only in the event of remaining financial allocation.
Date:
Signature of statutory representative, or authorized representative:
Stamp: