|  |  |
| --- | --- |
|  | **GEO_logo** |
| **GEO Participating Organization Registry** |
|  |
| **1. Organization** |
| Organization: |       | Date: | **DD/****MM/****YYYY** |

**2. GEO Principal**

*The GEO Principal is a senior executive who represents the organization in GEO governance processes, and attends GEO Plenaries and other key meetings.*

|  |  |
| --- | --- |
|  |   |
|  | First Name |  | Family Name |
|  [ ]  Mr [ ]  Ms |       |       |
|  |  |
| Position: |       |
|  |  |
| Unit / Division: |       |
|  |  |  |
| Email addresses: |       |       |
|  |  |  |
| Office phone: | +       |  |
|  |  |  |  |
| Mobile phone: | +       | Fax: | +       |
|  |  |  |
| Address:  |       |
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|  |       |
|  |  |
| Postal Code / City: |       |
|  |  |
| Country: |       |

**3. GEO Alternate**

*The GEO Alternate is authorized to serve on behalf of the GEO Principal at GEO meetings, and in all GEO correspondence.*

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|  |   |
|  | First Name |  | Family Name |
|  [ ]  Mr [ ]  Ms |       |       |
|  |  |
| Position: |       |
|  |  |
| Unit / Division: |       |
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| Email addresses: |       |       |
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| Office phone: | +       |  |
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| Mobile phone: | +       | Fax: | +       |
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| Address:  |       |
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|  |  |
| Postal Code / City: |       |
|  |  |
| Country: |       |

**4. GEO Focal Point**

*The GEO Focal Point is the person designated to receive copies of all relevant GEO correspondence, and distribute it throughout the organization.The GEO Focal Point is responsible to notify the GEO Secretariat of any changes necessary to the content of this form.*

|  |  |
| --- | --- |
|  |   |
|  | First Name |  | Family Name |
|  [ ]  Mr [ ]  Ms |       |       |
|  |  |
| Position: |       |
|  |  |
| Unit / Division: |       |
|  |  |  |
| Email addresses: |       |       |
|  |  |  |
| Office phone: | +       |  |
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| Mobile phone: | +       | Fax: | +       |
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| Address:  |       |
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|  |       |
|  |  |
| Postal Code / City: |       |
|  |  |
| Country: |       |

**5. Technical / Policy Specialist Contacts**

*Technical contacts are policy specialists in the designated topic area, and are involved in GEO activities.*

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| --- |
| **Data Sharing** |
|   | First Name | Family Name | Agency | Position | Email |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |
| **Climate** |
|   | First Name | Family Name | Agency | Position | Email |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |
| **SDGs / Statistical** |
|   | First Name | Family Name | Agency | Position | Email |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |
| **Disaster Risk Reduction** |
|   | First Name | Family Name | Agency | Position | Email |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |
| **Urban Resilience** |
|   | First Name | Family Name | Agency | Position | Email |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |

**6. Communications Liaison**

*Please provide a contact person from your communications department.*

|  |  |
| --- | --- |
|  |   |
|   | First Name |  | Family Name |
|  [ ]  Mr [ ]  Ms |       |       |
|  |  |
| Position: |       |
|  |  |
|  |  |  |
| Email addresse: |       |  |
|  |  |  |
| Phone: | +       |  |

**7. Additional Contacts**

*Please include here any additional persons involved with GEO who should be included in correspondence.*

|   | First Name | Family Name | Agency | Position | Email |
| --- | --- | --- | --- | --- | --- |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
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| [ ]  Mr [ ]  Ms |       |       |       |       |       |
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| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |
|  |  |  |  |  |  |
| [ ]  Mr [ ]  Ms |       |       |       |       |       |

**Please return the completed form to secretariat@geosec.org, or fax to +41 22 730 8520**