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|  | **Issued by the ATT Secretariat** |

**ATT CSP10 Working Group Meetings**

**SIDE EVENT - PROPOSAL FORM**

**Tuesday 20 – Friday, 23 February 2024**

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| --- | --- | --- | --- | --- |
| **Title**: | *Title of the side event* | | | |
| **Organizer:** | *Name of the organization(s) and any government(s) hosting the event* | | | |
| **Date →:**  **Room↓:** | **Tuesday**  20 February | **Wednesday**  21 February | **Thursday**  22 February | **Friday**  23 February |
| Room C (108 persons) |  |  |  |  |
| Room E (60 persons) |  |  |  |  |
| Room F (60 persons) |  |  |  |  |
| **Speakers:** | *List the speakers by name in order of appearance* | | | |
| **Start time:** |  | | | |
| **Finish time:** |  | | | |
| **Language:** |  | | | |
| **Technical requirements:** | Do you require audio visual equipment?  Yes  No  Please specify: | | | |
| **Interpretation:** | Do you intend to provide interpretation?  Yes  No | | | |
| **Catering:** | Do you intend to provide catering?  Yes  No | | | |
| **Address for invoice:** (if applicable) | *If applicable, name and email address of the person the invoice for interpretation services should be sent to* | | | |
| **Focal point:** | *Name and email address* | | | |
| **Description:** | | | | |

**\*** *Please indicate in this section which room you would prefer to hold the side-event in. You may select more than one option, if you have flexibility regarding dates. Please note the following:*

* *Interpretation: Interpretation equipment is available in all rooms;*
* *Capacity: Room C holds 108 persons; Rooms E & F hold 60 persons;*
* *Technical equipment:* *Use of audio-visual equipment is charged at CHF 260.- per room. If you require additional equipment or room configuration, additional costs will be incurred.*

***Please submit this form to Mr Tom Nijs, ATT Secretariat, at:*** [***tom.nijs@thearmstradetreaty.org***](mailto:tom.nijs@thearmstradetreaty.org) ***by 16 February 2024.***