**United Nations/Austria**

**World Space Forum 2023**

**"Space 4 Our Common Future"**

**Vienna International Centre (VIC), Vienna, Austria**

**12 - 14 December 2023**

**Organized jointly by**

**The United Nations Office for Outer Space Affairs,**

**The Federal Ministry for Climate Action, Environment, Energy, Mobility, Innovation and Technology (BMK),**

**The Federal Ministry for Europe, Integration and Foreign Affairs (BMEIA)**

Signature Form

Please submit this signed/stamped signature form in PDF format to worldspaceforum@un.org to complete your application.

Please name your file: Surname\_Name\_Signature form

## A. HEALTH REQUIREMENTS

**Life/major health insurance for each selected participant is the responsibility of the applicant or their institution**. By signing below, you acknowledge that such health insurance will not be provided to you by the United Nations.

### B. FUNDING

**Funds available to support participants in the expert meeting are limited.**Qualified participants who do not require funding provided by the organizers **will be considered on a priority basis**. Thus, we strongly encourage applicants to seek alternative funding to secure their participation. **Do you wish to be considered for funding support?**

# Accommodation and catering YES [ ]  NO [ ]

# Round trip travel to Vienna, Austria YES [ ]  NO [ ]

**C. Applicant signature:**

|  |  |  |  |
| --- | --- | --- | --- |
| Enter Text |  | Enter Text | Click or tap to enter a date. |
| (Full name of applicant) | (Signature of applicant) | (Place) | (Date) |

**D. HEAD OF NOMINATING ORGANIZATION SIGNATURE**

If you are applying as **representative of the organization you work for or your own organization/company**, please complete the following part with the signature of the Head of the nominating organization. This is required, irrespective of the request for funding support.

If you are applying in your individual capacity and do not represent any organization, please ignore the part E below.

**E. Signature of Head of nominating organization**

|  |  |  |  |
| --- | --- | --- | --- |
| Enter Text |  | Enter Text | Click or tap to enter a date. |
| (Full name, job title of Head of nominating organization) | (Signature of Head of nominating organization) | (Place) | (Date) |
|  |  |  |
|  | (Seal of organization) |  |