**CEN-CENELEC Workshop**

**on “Basic CBRN training curriculum for first responders and medical staff including first receivers”**

**Workshop Registration Form**

*Registering for a CEN-CENELEC Workshop is intended to be a lightweight-process. The obligations and commitments on yourself and your company are kept to a minimum in order to make registration easy.*

By signing this participant registration, you accept the following conditions:

**Assignment of Exploitation Rights**

In order to secure the legal protection of the documents elaborated by the participants to this CEN-CENELEC Workshop, in the framework of the Berne Convention for the protection of literary and artistic works you are asked to accept the following terms and conditions for the assignment of the exploitation rights of your contributions to European standardization:

1. Unless otherwise stated, you assign solely, exclusively and irrevocably to the European Committee for Standardization (CEN) and to the European Committee for Electrotechnical Standardization (CENELEC) for the benefit of its national Members the exploitation rights of your intellectual contributions, as are reproduced in the Publications resulting from the technical work of this CEN/CENELEC Workshop, as defined in paragraph 1.2 of [CEN/CENELEC Internal Regulations Part 2](https://boss.cen.eu/reference-material/refdocs/pages/).
2. You accept that the exploitation of the publication related to this CEN-CENELEC Workshop, containing all or part of your contributions, will take place without mention of your/your company/organization name, unless your explicit statement to that effect.
3. You accept however that you/your company/organization name is included in the list of parties having agreed a CEN-CENELEC Workshop Agreement and provided by CEN-CENELEC to those requesting this information.
4. You agree that this assignment does not preclude you from continuing to exploit your own copyrightable contribution for your own purposes, provided that such exploitation does not adversely affect the exploitation of the Publications specified in (a) above.
5. You agree that the assigned exploitation rights are granted free of charge worldwide and cover all languages and all forms of exploitation known at present, in particular and non-restrictively: publication, reproduction and adaptation by all means and all graphical support systems, by print, press, photocopy, microfilms, and via all magnetic, electronic and numerical support systems, memory cards, CD-ROMs, DVDs, Blu-Rays, films, photographs, slides, teledistribution, cable, satellite, web applications and on-line document servers and networks, distribution, sub-distribution, translation, derive revenue from duplication, communication to the public in total or in part, in summary or with comments, transfers of exploitation licences to third parties.
6. Should you offer intellectual contributions for which you do not personally hold the copyright, you undertake to declare this as early as possible and to name the holder of the copyright if known to you, with a view to securing the assignment of its exploitation rights to CEN-CENELEC.

**Patent declaration**

You acknowledge the provisions regarding declarations of patents as in the [CEN-CENELEC Guide 8 'Guidelines for Implementation of the Common Policy on Patents (and other statutory intellectual property rights based on inventions)'](https://www.cencenelec.eu/media/Guides/CEN-CLC/cenclcguide8.pdf).

**Working rules**

You subscribe to the objectives of the work, as outlined in the Workshop's Project Plan.

You agree to offer your expertise in the drafting process, and to contribute by electronic contributions or by participation in meetings to this process.

**Membership information and contacts**

1. Organization to be recorded as a participant:

|  |  |
| --- | --- |
| Organization name | Click or tap here to enter text. |
| Street/Street Number | Click or tap here to enter text. |
| Post code | Click or tap here to enter text. |
| Town/City | Click or tap here to enter text. |
| Country | Click or tap here to enter text. |

1. Please indicate what kind of organization you belong to:

|  |
| --- |
|[ ]  Industry and commerce |
|[ ]  Public sector |
|[ ]  Consumer protection |
|[ ]  Academic and research |
|[ ]  Business area standards application (e.g. test and certification institutes, accreditation bodies) |
|[ ]  Non-governmental organization (NGOs) |
|[ ]  Other (e.g. environmental protection and occupational safety associations) Specify: Click or tap here to enter text |

1. Background information on your organization and its interest in CBRN training curriculum for first responders and medical staff including first receivers:

*(50-80 words):*

|  |
| --- |
| Click or tap here to enter text. |

1. Please provide the necessary information to enable invoicing:

*(Do not enter information, if participation is otherwise covered.)*

|  |  |
| --- | --- |
| Fee for registering for this activity: | Click or tap here to enter text € |
| Company VAT number (EU): | Click or tap here to enter text. |
| Contact point to whom to address the invoice: | Click or tap here to enter text. |
| Contact person within the organization: | Click or tap here to enter text. |

Please note that your registration becomes effective as soon as the information enabling the invoicing process has been provided.

1. Name and contact details of the participant representing your organization:

*(It is possible to register only one participants)*

Participant 1:

|  |  |
| --- | --- |
| Title | Click or tap here to enter text. |
| Last Name | Click or tap here to enter text. |
| First Name | Click or tap here to enter text. |
| Function | Click or tap here to enter text. |
| Telephone | Click or tap here to enter text. |
| E-mail | Click or tap here to enter text. |

I have read and agree with the above conditions, and I wish to register myself and my organization as participant in this CEN/CENELEC Workshop.

Date: Click or tap here to enter text.

Signature:

Participant 2:

|  |  |
| --- | --- |
| Title | Click or tap here to enter text. |
| Last Name | Click or tap here to enter text. |
| First Name | Click or tap here to enter text. |
| Function | Click or tap here to enter text. |
| Telephone | Click or tap here to enter text. |
| E-mail | Click or tap here to enter text. |

I have read and agree with the above conditions, and I wish to register myself and my organization as participant in this CEN/CENELEC Workshop.

Date: Click or tap here to enter text.

Signature: