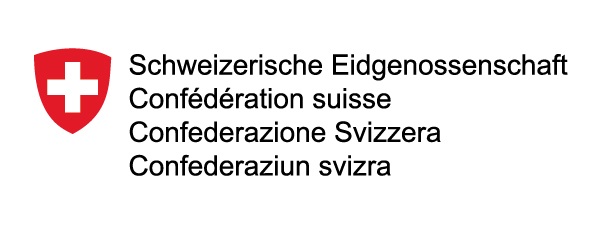
**EMBASSY OF SWITZERLAND**

**TO THE UNITED ARAB EMIRATES AND BAHRAIN**



Application for Nominal Support

\* Date of Request:

\* Organisation Name:

\* Name of Applicant:

\* Title/Position:

\* Address:

\* Phone:

\* Fax:

\* E-mail:

\* Event Name:

\* Event Date and Time:

\* Event Venue:

\* Event Sponsor(s):

\* Description of the purpose of the organization:

\* Source of funding for the organization and for the specific project or event for which the Embassy’s nominal support is sought:

\* Details of the specific project or event for which the Embassy’s nominal support is sought:

\* Description of relationship of the specific project or event with Switzerland:

\* Information on the expected participants/audience of the project or event for which the Embassy’s nominal support is sought:

\* Specific purposes to which the Embassy’s nominal support will be used – e.g. use in publicity material:

\* Full details of any other organizations or agencies from whom nominal support to this project or event is sought and their responses:

\* Other references:

\* Contact person and email address:

Please send this application form by post, fax or email

Embassy of Switzerland

P.O. Box 46116

Abu Dhabi – UAE

Fax: + 971 2 626 96 27

E-mail: abudhabi@eda.admin.ch