



Telephone: (022) 917 22 81  
Fax: (022) 917 00 54

Palais des Nations  
CH-1211 Genève 10

**CONVENTION ON CERTAIN CONVENTIONAL WEAPONS (CCW)  
Upcoming Meetings of Experts**

19 February 2014

The Permanent Representatives  
of the High Contracting Parties to the CCW  
Signatory States and States not party  
Geneva

Excellency,

Meetings of Experts on Amended Protocol II, Protocol V and Lethal Autonomous Weapons Systems

Pursuant to the decisions of the 2013 Meeting of the High Contracting Parties to the Convention, the Fifteenth Amended Protocol II Conference, and the Seventh Protocol V Conference, the following meetings of experts will take place during April and May 2014 at the United Nations in Geneva:

- CCW Amended Protocol II Group of Experts (1 – 2 April)
- CCW Protocol V Meeting of Experts (3 – 4 April)
- CCW Meeting of Experts on Lethal Autonomous Weapons Systems (13 – 16 May)

All three meetings will be held in **Conference Room XIX** of the Palais des Nations, United Nations, Switzerland.

The opening plenary meeting of the CCW Amended Protocol II Group of Experts will begin on **Tuesday, 1 April 2014 at 10.00 a.m.**

The opening plenary meeting of the CCW Meeting of Experts on Lethal Autonomous Weapons Systems will begin on **Tuesday, 13 May 2014 at 10.00 a.m.**

Registration and identification badges

To allow the necessary preparation of identification badges for delegates to enter the United Nations and the List of Participants, the members of your delegation participating in:

- Either the CCW Amended Protocol II Group of Experts or the Protocol V Meeting of Experts or both meetings should be notified to the CCW Secretariat by **Thursday, 20 March 2014;**

- The CCW Meeting of Experts on Lethal Autonomous Weapons Systems should be notified to the CCW Secretariat by **Thursday, 1 May 2014**.

For this purpose, please refer to the electronic version of the conference registration form which is available at the CCW website at [www.unog.ch/ccw](http://www.unog.ch/ccw), or to the attached form. The form needs to be filled out by your representatives who are **not based in Geneva**, and returned to the following address:

**CCW Implementation Support Unit  
UN Office for Disarmament Affairs, Geneva Branch  
Office C.115, Palais des Nations  
CH-1211 Geneva 10, Switzerland  
Fax : +41 (0)22 917 00 54, E-mail : [ccw@unog.ch](mailto:ccw@unog.ch)**

The security identification badges can be collected from the United Nations' Pregny Gate at 2 p.m. on the last Friday before the start of the meetings of experts. When collecting the identification badges the delegate must have a copy of their registration form and passport.

Formal credentials are not required for the Meetings of Experts. High Contracting Parties, Observer States and organizations are requested to notify the CCW Implementation Support Unit through a **note verbale** or an **official letter** of the names and titles of their official representatives.

#### Costs of the Meetings of Experts

In accordance with Article 13(5) of Amended Protocol II and Article 10(3) of Protocol V, the costs of meetings and conferences "shall be borne by the High Contracting Parties and States not parties participating in the Conference, in accordance with the United Nations scale of assessment adjusted appropriately". Participation in the Meetings of Experts is based on Permanent Missions submitting a note verbale or official letter detailing the members of their respective delegations to the Secretariat.

Yours sincerely,



Bantan Nugroho  
Head of the CCW Implementation Support Unit

C.c. International organizations and NGOs



**CONVENTION ON PROHIBITIONS OR RESTRICTIONS ON THE  
USE OF CERTAIN CONVENTIONAL WEAPONS WHICH MAY  
BE DEEMED TO BE EXCESSIVELY INJURIOUS OR TO HAVE  
INDISCRIMINATE EFFECTS (CCW)**

**Conference Registration Form**

*Please return this form to the CCW Secretariat by fax at (+41 22) 917 00 34*

Title of the Conference: \_\_\_\_\_

Date: \_\_\_\_\_

Delegation/Participant of Country, Organization or Agency: \_\_\_\_\_

Participant:

Mrs.  Mr.  Ms.  Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Participation Category:

Head of Delegation

Observer Organization

Delegation

NGO

Observer Country

Other (please specify below)

**Are you based in Geneva  
as a representative of  
your Permanent Mission?**

YES

NO

Participating from: \_\_\_\_\_

Participating until: \_\_\_\_\_

Official Occupation (in own country): \_\_\_\_\_

Passport or ID Number: \_\_\_\_\_

Valid until: \_\_\_\_\_

Official Telephone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Permanent Official Address: \_\_\_\_\_

Address in Geneva: \_\_\_\_\_

Accompanied by Spouse: \_\_\_\_\_

YES

NO

Family Name (Spouse): \_\_\_\_\_

First Name (Spouse): \_\_\_\_\_

**On Issue of ID Card**

**SECURITY USE ONLY**

Participant Signature: \_\_\_\_\_

Card No. Issued: \_\_\_\_\_

Spouse Signature: \_\_\_\_\_

Initials, UN Official: \_\_\_\_\_

Date: \_\_\_\_\_

**MAP OF THE PALAIS DES NATIONS  
UNITED NATIONS OFFICE AT GENEVA**

