



KnightMUN IX – October 16-17, 2010

Delegate Registration Form

REGISTRATION & FEES DUE: Received by Oct. 11, 2009

Delegates may either represent a nation individually or with a partner, except in SC. This is on a first come first serve basis

Name of School: _____

Name of Delegate(s): _____

Email Address(es): _____

Please refer to the available country matrix for available Country and Committee Assignments

<http://www.knightmun.com/2010/Matrix.xls>

In order for us to place you in a committee of your choice, please rank the six committees from favorite to least favorite. Please also list the top three countries you would prefer to represent in each committee and your top regional preferences overall.

Committees (rank from 1-6)

Top 3 Country Choices in Each Committee (When Applicable)

_____ **General Assembly 4th Committee** _____

_____ **World Health Organization** _____

_____ **UNDP** _____

_____ **IAEA**
(International Atomic Energy Agency) _____

_____ **OIC**
(Organization of the Islamic Conference) _____

_____ **NATO** _____

_____ **Security Council (*crisis*)** _____

Security Council, designed for more experienced delegates, will not only include the designed topics, but simulated international crises that the delegates must respond to in their committee. With frequent updates, bulletins, and guest speakers, the delegates must respond in real time as different situations develop. This year, we will be featuring the North Atlantic Treaty Organization committee. This committee will let delegates experience a new way of debating and diplomacy.

Regional Preferences (Top 3 Selections, i.e.: Europe, Asia, Latin America):

(Please note that it may not be possible to assign delegates with their top selection and that the process is first come, first serve. If your top three nations are taken, we will assign based on one of your other committee preferences, or nations based on regions)

Special knowledge, interests or skills that make you well suited for a certain committee:

(Filled out by either delegate)

How many years have you done Model UN? _____

Student

Print Name: _____

Initial: _____ Date: _____

Advisor

Print Name: _____

Initial: _____ Date: _____

(If Dual Delegation, second delegate must fill out bottom also)

Student

Print Name: _____

Initial: _____ Date: _____

Advisor

Print Name: _____

Initial: _____ Date: _____

For More Information, Please Contact our Executive Director, Anthony Aslou, at knightmunexec@gmail.com
<http://www.knightmun.com>