# Registration form for a registered application provider identifier of category A

This request is submitted in accordance with ISO/IEC 7816-5, *Identification cards – Integrated circuit cards – Registration of application providers*.

* 1. To be completed by the requesting organization

|  |  |  |  |
| --- | --- | --- | --- |
| Name of organization | | | |
| Address to be registered | | | |
| Principal contact in organization | | | |
| Telephone number | Fax number | | Email Address |
| Address for correspondence/billing | | | |
| Date | | Signature | |

* 1. To be completed by national standards body

|  |  |
| --- | --- |
| Request received by | |
| Date | Signature |

* 1. To be completed by ISO/IEC 7816-5 registration authority

|  |  |
| --- | --- |
| Registered application provider identifier | |
| Date | Signature |