

5th European Union Science Olympiad – Potsdam, Germany – EUSO 2007
INVITED GUEST REGISTRATION FORM

Country: _____

Please return before 20th February 2007 to:

EUSO 2007 Director: Dr. Eckhard Lucius

Email: lucius@ipn.uni-kiel.de

DETAILS	Invited Guest
Family name	
First name	
Date of birth (DD-MM-YY)	
Title (Dr. Ms. etc)	
Gender (male/female)	
Contact address	
Email address	
Emergency phone number*	
Spoken languages	
T-shirt size (S, M, L, XL, XXL)	
Double or single room**	
Food-dietary requirements	
Medical requirements	
Private Medical Insurance (yes/no)	

(* Country code, area code, number)

** Single room no extra costs, if double room write the name of your room partner)

The above information is correct:

EUSO Country Coordinator