

5th European Union Science Olympiad – Potsdam, Germany – EUSO 2007

MENTORS REGISTRATION FORM

Country: _____

Please return before 20th February 2007 to: EUSO 2007 Director – Dr. Eckhard Lucius Email: lucius@ipn.uni-kiel.de

DETAILS	Biology	Chemistry	Physics
Family name			
First name			
Date of birth (DD-MM-YY)			
Title (Dr. Ms. etc)			
Gender (male/female)			
Home 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