



SCHOOL REGISTRY
Registration form to be completed in block capitals

School name			
Country		City	
Adress			Postal Code
Phone		Mobile P.	
Director		Mobile P.	
Teacher		Mobile P.	
E-mail			
Facebook			
VK			

Please complete each part completely in block capitals.
 Incomplete registration forms will not be accepted

Date

Legible signature of the group or school leader

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