



SCHOOL DETAILED REGISTRATION FORM

PLEASE USE CAPITAL LETTERS ONLY!

Detailed Information

Name of school: _____

School address: _____

Zip code: _____ City: _____

Country: _____

School phone No.: _____ Fax No.: _____

MUN Director phone No.: _____ Fax No.: _____

Name of MUN director(s): _____

School's e-mail address: _____

MUN director's e-mail address: _____

Our school declares to bring a total of _____ students (only delegates), in addition to _____
MUN director(s).

Below please provide a list of your delegations in order of preference:

- | | | |
|----------|-----------|-----------|
| 1. _____ | 6. _____ | 11. _____ |
| 2. _____ | 7. _____ | 12. _____ |
| 3. _____ | 8. _____ | 13. _____ |
| 4. _____ | 9. _____ | 14. _____ |
| 5. _____ | 10. _____ | 15. _____ |



MUN Director(s)

Name and Surname	Gender	Allergies	Diet

Delegates

Name and Surname	Date of Birth	Gender	Housing	Allergies	Diet





We would appreciate it if no personal switches were made after announcing the housing details. Should any issues arise after the housing arrangements have been announced, please contact us via electronic mail.

Please return this form by e-mail to info@tomun.eu, by fax to +48 56 622 79 33, or by postal service to Załek Prosowy 1, 87-100 Torun, Poland. We kindly ask you to send it by 15 April 2019 (early bird registration) or by 31 May 2019 (official registration deadline).



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