

Application Form for AM 2003 Ljubljana, Slovenia and Sarajevo, Bosnia and Hercegovina

Please read the "Important Notifications" before filling out the application form. You will find them at the end of this document. Please fill in the Application Form in CAPITAL LETTERS.

YES, I would like to participate in the FEJS Annual Meeting 2003.

1. Participant Information

Last name:

First name(s):

Address:

Postal code:

City:

Country:

Telephone number:

Mobile Number:

Passport Number:

E-mail:

Dietary requirements:

Vegetarian:

Other:

I apply as a:

- Delegate
- Non-Delegate
- P-Meeting participant
- Member of Supervisory Board
- Member of Organising Committee
- Member of Secretariat
- Veteran

I need VISA:

- Yes
- No

2. Teaching Institution information:

School/Faculty name:

University name:

Journalism Department contact person:

Contact Person Email:

University Website:

Address:

Postal Code:

City:

Country:

Phone:

Fax:

There is an FEJS group on my school:

- Yes
- No

I have contacted the Contact Person in my country:

- Yes
- No
- There is no Contact Person in my country

This is my first time in an FEJS event:

- Yes
- No, I've already participated in

(check www.fejs.org)

Date and Signature of participant

Date, **Stamp** and **Signature** of Headmaster from the Journalism Teaching Institution / Department