**APPLICATION FORM**

**I live by the Sea Ocean Action Workshop 2021**

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| --- | --- |
| **N Name of contact person**  **(Educator, teacher, group mentor)** |  |
| **E-mail;**  **phone number** |  |
| **Organization, full address, telephone number** |  |
| **Age and number of students** | **10-12 13-15 16-18 Number of participants:** |
| **Please, state preferred days and times in selected months.** | |  |  |  | | --- | --- | --- | | **March** | **April** |  | |  |  |  | |
| **Please, briefly describe your motivation for participating in the workshop.** |  |

□ I consent to the processing of my personal data by the organizers for the purposes necessary for the implementation of the workshop. I agree to the free photo and audio-video registration of fragments of the workshop covering my image and the free use of these records for scientific, promotional and documentation purposes of the Organizers.

**IMPORTANT:** Please send this form by email to: [**office@todaywehave.com**](mailto:office@todaywehave.com), by **15 March 2021,** with a subject: **Ocean Action workshop.** Priority of submissions counts. We will confirm the selected date and provide further information by returning email.