



E.S.C.O.T. - EUROPE

European SchoolsMONTEGROTTO TERME
ABANO TERME
PADOVA

Registration form for High Schools to the event:
"European Schools Gala 2014"

Please send the completed application form to: school.registration@escot-europe.eu

Within February 28, 2014

Nation:	
Name of Institute:	
City:	
Address:	
Postcode:	
Phone:	
Website:	
E-mail:	

Our institute would like to enrol in:	YES	NO
• <i>The best presentation of High School</i> (video clip)		
• <i>A day in a Health Resort with my School</i> (video clip)		
• <i>European Open Day</i>		
• <i>Graphic competition</i>		
• <i>International Tournament Volleyball - Girls - E.S.C.O.T. - EUROPE CUP</i>		
• <i>International Tournament Volleyball - Boys - E.S.C.O.T. - EUROPE CUP</i>		

We will participate in the "European Schools Gala 2014"

With a Head Teacher:	
With a number of Teachers:	
With a number of Students:	

Responsible Teacher's contact

Name and Surname:	
Phone:	
Mobile phone:	
E-mail:	

Other participant teachers

Name and Surname:	
E-mail:	
Name and Surname:	
E-mail:	
Name and Surname:	
E-mail:	
Name and Surname:	
E-mail:	
Name and Surname:	
E-mail:	

Date,		The Head Teacher

With this application form, please send to staff@escot-europe.eu
the photo of the School. This photo will be online on our web site.



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Registration fee

“European Schools Gala 2014”

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Phone:	
Website:	
E-mail:	

On behalf of my school, I request to enrol my institute in the European Schools Gala 2014 with a total number of participants n°. As the registration fee is 20 euro per participant, I will pay a total amount of €. with a bank transfer to:

E.S.C.O.T. – ITALIA (European Scientific Committee on Thermalism)

BPM – Banca Popolare di Milano Agency 153

Account number: 1682

BIT: BPMIITM1153

IBAN: IT62 A 05584 20403 000000001682 BIC: BPMIITMMXXX

Reason for payment: Registration fee to the European Schools Gala 2014

Attached to this application form, it’s necessary to send the copy of banking payment.

Date,

Responsible Teacher

Prof.