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| International Meeting of Orthodox Youth 2016 – International conference |
|  |
| Prešov | Slovakia | 20 – 26 July 2016 |
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| APPLICATION FORM |
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| Name of Local Church | Write here. |

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| Name of Youth Organisation | Write here. |

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| Position or your activities in church, youth organisation | Write here. |

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| Title | here | Nameas in passport | Write here. | Surnameas in passport | Write here. |

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| Address | Write here. | City | Write here. |

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| Country | Write here. | ZIP code | Write here. |

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| Email | Write here. | Telephone | Write here. |

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| Date of birth | Select here. | Citizenship | Write here. |

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| Passport number | Write here. | Issued by | Write here. |

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| Date of issue | Select here. | Date expires | Select here. |

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| Occupation | Write here. | Languages | Write here. |

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| Do you need visa  |[ ]  **No** |
| to enter Slovakia? |[ ]  **Yes** | **» According to the Act on Stay of Aliens the invitation for visa should be verified by** **Alien Police Department in Slovakia and a fee 33 EUR for verification may apply.****» Please attach a scan of the identification page of your passport to this application.** **» Please also attach an endorsement letter from your church or youth organisation.** |

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| Syndesmos events you have attended in past |  |
| 1. | Write here. | 2. | Write here. |
| 3. | Write here. | 4. | Write here. |

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| Participation conditions |  |
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| **Participants:** | **Christian youth over 18 years from all countries, able to communicate in English** |
| **Registration fee:** | **120 EUR » includes programme, board and lodging** **» travel costs, visa costs, mandatory travel insurance are covered by participants themselves****A limited subsidiary fund is available and may be granted on a case by case basis upon request.** |
| **Travel:** | **Arrivals are on 19 July and 20 July by noon. Departures are on 26 July afternoon and 27 July.****Proposed itinerary and instructions will be sent later.** |
| **Legal notice:** | **I understand that only fully completed and duely submitted Application form will be considered.****I understand that Syndesmos will contact me if my application is accepted.****I agree to process my personal data and I accept participation conditions.**  |

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| Place | Write here. | Date | Select here. | Signature | Sign here. |

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| Application to be sent to: | imoy2016@orthodox.sk |