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## PARTICIPATION FORM

|  |  |  |  |  |  |  |  |  |  |  |
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| **Last name** | |  | |  | | Name | |  | | |
| **Job Description** | |  | | | | | | | | |
| **Union or Association** | |  | | | | | | | | |
| **Email:** | |  | |  | | Τel number | |  | | |
| **Address** | |  | | |  | **City** | |  | | |
| **Postal Code** | |  | | |  | **Country** | |  | | |
| **Please check the appropriate box for your registration:** | | | | | | | | | | |
|  |  | | **EARLY BIRD until 31/3/2018** | | | | | | **REGULAR** | |
| **PROFESSIONALS** | | | ⬜ | | | | **130 €** | | ⬜ | 150 € |
| **STUDENTS** | | | ⬜ | | | | **90 €** | | ⬜ | 100 € |
| PLEASE PRINT AND EMAIL YOUR REGISTRATION TO: [dramaandplaytherapists@gmail.com](mailto:dramaandplaytherapists@gmail.com)  WE WILL SEND YOU A CONFIRMATION EMAIL WITH INSTRUCTIONS ON PAYMENT WAYS | | | | | | | | | | |