**Easter Reunion 2019 – Registration Form**

|  |  |  |
| --- | --- | --- |
| **Main details** | | |
| date | | 19 to 21 April 2019 |
| location | | KV-Schule Baden  Kreuzlibergstrasse 10, 5400 Baden |
| participiation fee | 3 days | 150.- CHF |
| single days | 100.- CHF |
|  | |  |
| **Registration** | | |
| surname | |  |
| name | |  |
| e-mail address | |  |
| mobile phone number | |  |
| Capoeira name | |  |
| training location | |  |
| student of ... | |  |
| day(s) I will attend | | Fr Sa Su |
| accommodation in the Acadêmia | | Yes No |

With the registration, you are obligated to pay the full participation fee.

Insurance is the responsibility of the participant.

signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_