

**Application Form**

**International Feldenkrais Training Chiemsee 9 / Germany 2018 – 2022**

ARTEM  
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Name.....

Surname.....

Date of birth..... Place of birth.....

Street.....

Country..... Zip Code..... City.....

Telephone \daytime..... \evening.....

mobil..... E-Mail.....

These data will be given to the DataBase of the DTAB (German Training Accreditation Board) containing all Feldenkrais-students and practitioners.

These Data can be given to other training-participants who want to get in contact with me.

- Yes  No

I am working

- employd  freelance  
 other status .....

Mode of payment

- Per segment  yearly  
 payment by instalments

Place..... Date.....

Signature.....