

E.S.C.O.T. - EUROPE CUP
International tournament for High Schools

Application form to participate in the volleyball tournament - **GIRLS**
 Please, send the completed application form to: volley.registration@escot-europe.eu

Within March 8, 2014

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

We will participate in the Volleyball tournament - girls

With a number of Teachers:	
With a number of Students:	

List of participants

Responsible Teacher's contact

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

List of players

01. Name and Surname:	
02. Name and Surname:	
03. Name and Surname:	
04. Name and Surname:	
05. Name and Surname:	
06. Name and Surname:	
07. Name and Surname:	
08. Name and Surname:	
09. Name and Surname:	
10. Name and Surname:	
11. Name and Surname:	
12. Name and Surname:	

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