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**YE “SHAPE your life”**

**22nd – 29th June**

**Prcanj, Montenegro**

**APPLICATION FORM**

***Details of participant***

|  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |
|  | **Sending organization** | |  |  | | | |  |
|  | | | | | | | | |
|  | **Name and surname** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **Date of birth** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **Street address** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **City + ZIP code** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **Country** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **Gender** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **E-mail address** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **Mobile phone** | |  |  | | | |  |
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***Person to be called in case of emergency situations***

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|  |  |  |  |  |  |  |  |  |
|  | **Name and surname** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **E-mail address** | |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |
|  | **Mobile phone** | |  |  | | | |  |
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***Profile of participant***

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| **Have you ever taken part in an international organization before? If yes please describe your task and responsibilities:** |
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| **Have you ever attended any Youth in Action / Erasmus+ Program project activity? If yes, please explain what type of action and theme of the project:** |
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| **What is your motivation for attending the project?** |
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| **What is your relation with project theme? What can you offer & bring to the project?** |
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| **Do you have any previous sport experience? If yes, specify.  Are you actively included in training process at the moment?** |
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| **How would you describe your physical condition? (beginner, intermediate, advanced)** |
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| **What is a level of your knowledge about healthy lifestyle?** |
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***Additional information***

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| **Do you have any allergies or any medical restrictions?** |
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| **Do you have any food requirements? (vegetarians, diabetics, diets, no pork, etc.)** |
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