

Registration Form for Field Trips

Name of the field trip:
Organizer: (Name, faculty, institute, department)

The following students are taking part:

seq. no.	Name	First name	Date/place of birth	Natio-nality	Religion (if relevant in case of medical care)	Address	Phone (incl. area code) and mobile no.	Next of kin (incl. type of kinredship, contact details)	Details on health/travel insurance (incl. contact details of insurance company)

Freiburg, <div style="text-align: center;">Date</div> <div style="text-align: center;">Signature of the responsible field trip organizer</div> <div style="text-align: center;">Approved by dean of student affairs / date</div>
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Note on the English version: The official language is German, in case of doubt, the German version shall prevail.