



Application for
International SPACE CAMP® 2010



Circle: Educator Student

Please Print or Type

To be sent to the Norwegian Space Centre before 9 April 2010

Country: _____

Name: First: _____

Age: _____

Second: _____

Birthday:

Month: _____ Day: _____ Year: _____

Last: _____

If Student list Parent/Guardian: _____

Sex: (circle)

Female

Male

Home Address:

(As it should appear on an envelope)

Home Phone: (include country and city code)

Work Phone: (include country and city code)

Cell Phone: (include country and city code)

Fax: (include country and city code)

Email Address: (home)

Email Address: (school)

School: _____

Subjects Taught/Studied: _____

What are you hoping to gain from this experience?

Additional information may be attached

Health Forms for the Students are required. They will be emailed directly to those who are chosen to attend the camp.