



Application for International SPACE CAMP® 2011



Circle: Educator Student

Please Print or Type

To be sent to the Norwegian Space Centre before 4 April 2011

Country: _____

Name: First: _____ Age: _____
 Second: _____ Birthday: _____
 Last: _____ Month: _____ Day: _____ Year: _____

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.