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| ***Registration Form for (Online) Teacher Training Event***  *Date*  *Hour* | | | | |
| **Name** | **E-mail** | **Field** | **Country** | **School/Institution** |
|  |  |  |  |  |

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| --- | --- |
| **Registration:** | Please fill this form and return it until *Date* to *Name of the Responsible person: E-mail address or phone* |

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