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| Logotípia magyar_Feher_alapra.jpg | **HOLOCAUST MEMORIAL CENTER**H-1094 Budapest, Páva utca 39.tel.: (+36 1) 455 3333Email: info@hdke.huwww.hdke.hu |

**Application Form**

**6th “Holocaust by Bullets” seminar for teachers**

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| Name: |  |
| Maiden Name: |  |
| Place and Date of Birth: |  |
| Mother’s Name: |  |
| Nationality: |  |
| Address: |  |
|  |  |
| Postal address (if different): |  |
| Telephone; mobile no.: |  |
| E-mail: |  |
| Qualifications: |  |
| Name of School/ Workplace: |  |
| Address of School/Workplace: |  |
| Occupation: |  |
| Subjects taught: |  |
| Have you taken part in a Yahad-seminar before (in France or elsewhere) ? |  |

1. I hereby declare that I wish to participate in the “Holocaust by Bullets’ teacher training seminar to be on 22-24th September 2022 organised by the Holocaust Memorial Centre, Budapest and Yahad-in -Unum.
2. Please provide me with the following services/facilities during the seminar (underline the relevant responses):

Meals: YES / NO

FOOD preferences No special needs / vegetarian/allergy/ etc:

Accommodation: YES / NO

Compensation for Travel Expenses: YES / NO

*Notes:*

*Meals: During the seminar the Memorial Centre is going to provide meals for the participants during the training.*

*Accommodation: The Memorial Centre will provide accommodation for participants who are not residents in Budapest for two nights (22-23rd September) in a nearby hotel. Participants must share a room with a fellow participant.*

*Compensation for travel expenses: The Memorial Centre will compensate for Hungarian participants travel expenses, while Yahad-in Unum will compensate for international train/bus/plane tickets of the participants between Budapest and the place of residence of the participants* ***up to 200 euros****. Unfortunately, we are not able to compensate for the travel expenses for participants coming by car.*

1. According to 5. § (1/a) of Law CXII of 2011 on the right to self-determination as regards information and freedom of information, I hereby agree that my personal data may be used during the 6th “Holocaust by Bullets” seminar for teachers organised by the Holocaust Memorial Centre.
2. By signing this application form, I agree to participate in the seminar. Participation may be withdrawn until 31th August by sending an email to the following email address: oktatas@hdke.hu
3. **By signing this application form, I agree to provide the necessary Covid 19 vaccine certificates and test results on arrival**.
4. In case the participant fails to attend the seminar for any reason, the participant is obliged to pay for his/her accommodation and meals within 15 days.
5. **Deadline for Application: 15th June 2022**

………………., ………day……………. month 2022.

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Signature of Applicant