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| **REGISTRATION FORM** | | |
| **Media Creator** | | |
| **PERSONAL INFORMATION** | | |
| First name: |  | |
| Surname: |  | |
| Name you want to be called in the event: |  | |
| Gender: |  | |
| Address, zip code, city, country: |  | |
| Nationality: |  | |
| E-mail address: |  | |
| Place and date of birth: |  | |
| Telephone number, preferably mobile: |  | |
| Level of English: (basic, good, excellent) |  | |
| Study or Occupation (are you hired or not?) |  | |
| Diet / Allergies / Special Needs: |  | |
| Contact person in case of emergency  Full name:  Address:  Phone numbers:  Relationship to you: |  | |
| Other remarks or questions: |  | |
| **FOCUS QUESTIONS** | | |
| What is your motivation to join in Media Creator? | |  |
| How do you expect to improve by participating in this event? | |  |
| What organization(s) are you connected with? | |  |
| What is your media experience until now? | |  |
| What is your international experience until now? | |  |
| What do you do for your self-brand/image? | |  |
| Will you bring a photocamera/videocamera? | |  |
| Will you bring a laptop? | |  |
| Are you willing to do a follow-up self-change campaign to improve your self-brand? | |  |