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| **Afir Logo.jpgBeekeeping Apprenticeship Program****Feb.-Oct. 2019 | Saidoun - Jezzine (South Lebanon)****Round 2** | **Adaptation Bilingual.jpg** |
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| **REGISTRATION FORM** |
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| Please fill the form below and send it by email to contact.soilslebanon@gmail.com **by February 9, 2019 at the latest****\*All fields are required - Write N/A where the information is not applicable** |
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| **PERSONAL INFORMATION** |  |
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|  1. First name: |  |  |  3. Date of birth (DD/MM/YYYY) |  |
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|  2. Last name: |  |  |  4. Gender(Male/Female) |       |
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| **CONTACT DETAILS** |  | **ADDRESS** |
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|  5.Mobile |  |  |  8. Caza |  |
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|  6. Landline |  |  |  9. City or Village |  |
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|  7. Email |  |  | 10. Street |  |
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| **BEEKEEPING EXPERIENCE** |  |
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| 11. Have you completed a Beekeeping Introductory Workshop?(YES/NO) |  |
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| *If yes, please state with whom and program covered.* |
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| **FOOD/SAFETY INFORMATION** |  |
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| 12. Do you have specific diet needs or restrictions?(YES/NO) |  |
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| *If YES, please specify (vegan, vegetarian, gluten-free, etc.)* |  |
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| 13. Do you suffer from any allergies/chronic conditions?(YES/NO) |  |
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| *If YES, please list your medication(s) and dosage* |  |
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| IN CASE OF EMERGENCY, WHOM SHOULD WE CONTACT? |
| 14. Emergency contact name |  | 15. Emergency contact tel. |  |
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| **PARTICIPATION FEES** |
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| **Fees include tuition costs, training materials, and all meals/snacks** |
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| Regular participants | Session 1 (mandatory): $100Sessions 2-7: $50 per sessionSession 8: FREE - IF participants attend all 7 previous sessionsTotal: $400 |

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| Do you have any comments, questions or anything else you'd like to share with us? |
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| **For further questions and details, please email us: contact.soilslebanon@gmail.com or call +961-71-617988** |