

# Application form

Your registration should be handed in 4 month before the requested date. The registration is only valid, if finally confirmed by us.

Please send your registration to:

E-Mail: [besucherdienst@gedenkstaette-sachsenhausen.de](mailto:besucherdienst@gedenkstaette-sachsenhausen.de)



[www.sachsenhausen-sbg.de](http://www.sachsenhausen-sbg.de)

*Please fill in completely in capital letters!*

## Programme Information

Date: Date: _____ Time: _____ - _____ Week day: <input type="checkbox"/> Tue   <input type="checkbox"/> Wed   <input type="checkbox"/> Thu   <input type="checkbox"/> Fri   <input type="checkbox"/> Sat   <input type="checkbox"/> Sun	Optional date: Date: _____ Time: _____ - _____ Week day: <input type="checkbox"/> Tue   <input type="checkbox"/> Wed   <input type="checkbox"/> Thu   <input type="checkbox"/> Fri   <input type="checkbox"/> Sat   <input type="checkbox"/> Sun
Programme: <input type="checkbox"/> 2 hours Tour/ Theme oriented Tour <input type="checkbox"/> 4 hours Tour and Workshop <input type="checkbox"/> 5 hours Workshop <input type="checkbox"/> 6 hours Workshop <input type="checkbox"/> 7 hours Workshop <input type="checkbox"/> _- day Workshop	Key aspects, if demanded:  You'll find key aspects on our website: <a href="http://www.gedenkstaette-sachsenhausen.de">www.gedenkstaette-sachsenhausen.de</a>  <input type="checkbox"/> _____
Language: <input type="checkbox"/> German <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Hebrew <input type="checkbox"/> Italian <input type="checkbox"/> Dutch <input type="checkbox"/> Polish <input type="checkbox"/> Russian <input type="checkbox"/> Spanish <input type="checkbox"/> Czech <input type="checkbox"/> other language: _____ <input type="checkbox"/> Exchange programme (two or more languages) : _____	

## Group Information

Number of participants: _____ (max. 30 people per group)  Group prices for our academic programme. Tour (16-30 people), reduced price (e.g. students), German: 25 € Tour (max. 15 people), , reduced price (e.g. students), German: 15 € Tour (16-30 people), reduced price (e.g. students), other language: 50 € Tour (max. 15 people), reduced price (e.g. students), other language: 40 € Tour (16-30 people), regular price: 85 € Tour (max. 15 people), regular price: 65 € Workshop, reduced price (e.g. students), German: 40 €/day Workshop, reduced price (e.g. students), other language: 55 €/day Workshop, regular price, German and other language: 100 €/day  Cancellation will be charged according the schedule of fees. There is no entrance fee for the memorial and the exhibitions.	Contact information:  Institution:  Contact (mobile phone) on the day of the tour / workshop:  <input type="checkbox"/> I like to receive further information about the programme of the memorial.
<input type="checkbox"/> Students or apprentices (14 to 21 years) <input type="checkbox"/> extracurriculum group (14 to 21 years) <input type="checkbox"/> Group (adults)	Do you want to stay at the Youth Hostel „Haus Szczypiorski“? <input type="checkbox"/> yes  Do you need any support visiting the memorial (e.g. wheelchair accessible programme)? <input type="checkbox"/> yes
Age <input type="checkbox"/> 14   <input type="checkbox"/> 15   <input type="checkbox"/> 16   <input type="checkbox"/> 17   <input type="checkbox"/> 18   <input type="checkbox"/> 19 and older  School: <input type="checkbox"/> Secondary school <input type="checkbox"/> Vocational school <input type="checkbox"/> Special school <input type="checkbox"/> University <input type="checkbox"/> other: _____	Country: <input type="checkbox"/> D <input type="checkbox"/> A <input type="checkbox"/> BEL <input type="checkbox"/> CH <input type="checkbox"/> CZ <input type="checkbox"/> DK <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> FIN <input type="checkbox"/> GB <input type="checkbox"/> I <input type="checkbox"/> ISR <input type="checkbox"/> LUX <input type="checkbox"/> NL <input type="checkbox"/> NOR <input type="checkbox"/> PL <input type="checkbox"/> RUS <input type="checkbox"/> SWE <input type="checkbox"/> TR <input type="checkbox"/> UKR <input type="checkbox"/> USA <input type="checkbox"/> other <input type="checkbox"/> bi- / multi-national group

## Address

## Further information and requires

Name: Institution: Street: Postal code and City: Telephone: _____ Fax: _____ E-Mail: Day of registration: _____	(Empty space for further information and requirements)
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