



Second Forum  
19<sup>th</sup> – 23<sup>rd</sup> of October 2005, Cagliari

## Registration Form

Name:

Institution:

Address:

Telephone:

Email:

!!! For all participants NO registration fee is required.

I will participate as:

Key person of (name of the country)

Representative of (name of the institution)  
on my own expenses

Please return this form by e-mail to Mieke or by fax to the Prof. H. Van Coppenolle, project co-ordinator  
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Joint Actions

Sports and Physical Activity for persons with disabilities – Awareness, Understanding, Action

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