



## Other Information

Please indicate any dietary, health, allergy, physical or other special requirements below.

## Confirmation of Participation

I, (Your full name),  
confirm my participation in the 12<sup>th</sup> COEUR – Idea Generation Workshop, from the 15<sup>th</sup> to the 20<sup>th</sup> September in  
Scotland, UK.

## Travel Information

### Expected Arrival

Place:

Date:

Time:

Mode of transport:

Flight number:

### Expected Departure

Place:

Date:

Time:

Mode of transport :

Flight number:

Please note: A payment of GBP100 is required as a deposit to be paid before 15.06.2014 (By a money transfer to Robert Gordon University) and a written copy of this application is required to make your reservation valid.

Place and date of signature

Name of the Participant

Signature

**Application Form must be send to: Tracy Pirie – t.a.pirie@rgu.ac.uk Deadline: 31<sup>th</sup> May 2014**