



Application number:

UNIVERSITY SPORTS CENTER

STUDENT REGISTRATION FORM

ACADEMIC YEAR 20..... /20.....

LAST NAME.....		FIRST NAME.....	
FATHER'S NAME.....		DEPARTMENT.....	
UNDERGRADUATE <input type="checkbox"/>	POSTGRADUATE <input type="checkbox"/>	DOCTORAL <input type="checkbox"/>	
STUDENT ID NUMBER	YEAR OF STUDIES.....	YEAR OF BIRTH.....	
ACCOMMODATION ADDRESS IN PATRAS			
STREET.....		NUMBER.....	
PHONE NUMBER.....		E-MAIL.....	
PERMANENT RESIDENCE ADDRESS			
STREET.....		NUMBER	
CITY / COUNTRY		PHONE NUMBER.....	
SYSTEMATIC ENGAGEMENT IN SPORTS (to be completed only by athletes)			
SPORT			
DISTINCTION/PERFORMANCE			
OCCASIONAL ENGAGEMENT IN SPORTS (please indicate two sporting activities that interest you most)			
1).....		2).....	

Patras,20.....

(Student's signature)