***Application form***

***Youth Leadership Camp***

**International Diabetes Federation European Region**

 **22 July – 28 July 2012**

**Tirrenia, Italy**

**Please return to:** **Katie.gallagher@idf-europe.org** **before 30 April 2013**

**Personal Information**

|  |  |
| --- | --- |
| First Name |  |
| Last Name |  |
| Gender |  |
| Date of Birth |  |
| Nationality |  |
| Address (home) |  |
| Address (current address if different from home address |  |
| Home telephone number (+country code) |  |
| Mobile telephone number (+country code) |  |
| E-mail address |  |
| Facebook username |  |

**Diabetes Information**

|  |  |
| --- | --- |
| Diabetes Type |  |
| Age at diagnosis  |  |
| Give brief description of treatment regimen including what insulin regimen currently on, pen devices, pumps etc. |  |
| Do you have any other condition? (If yes please indicate which condition and what treatment you are taking) |  |

**Education and Experience**

|  |  |
| --- | --- |
| Name of your Diabetes Association |  |
| Position on Board or Committees |  |
| Describe any activities done in the last few years related to diabetes through the association |  |
| Have you ever worked or participated in diabetes camps in your country?If yes, please explain |  |
| Do you regularly practice any kind of physical activity/sport? If yes, please indicate what sport? How often? And the time you spend doing physical activity per week. |  |

Please write an essay up to 300 words explaining why you want to participate and what your expectations are

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If you wish, you can in addition to the completed application form send a video (to: Katie.gallagher@idf-europe.org), (maximum of 1 minute), of yourself explaining why you want to participate and what your expectations are.

Please complete and send your application before **30 April 2013** to:

Katie.gallagher@idf-europe.org

OR/

Katie Gallagher

International Diabetes Federation European Region

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B-1170 Brussels

Belgium