Registration for Project ***Self(ish) Love?***

***First and last name:***

***Adress, Tel., E-Mail:***

***Nourishment (Please check and complete the appropriate category ):***

* vegetarisch
* vegan
* koscher
* glutenfrei
* laktosefrei
* other:

***Which Language(s) do you speak? (Please check and complete the appropriate category)***

* Czech
* Polish
* German
* English
* Other: