

SCHOOL REGISTRATION FORM

**AMNESTY
INTERNATIONAL**



Amnesty International Ireland
Seán MacBride House
48 Fleet Street
Dublin 2, Ireland
youth@amnesty.ie
01 863 8341

SCHOOL INFORMATION

Name of School: _____

School Address: _____

STAFF CONTACT

Name: _____

Mobile: _____ Subject Taught: _____

Email: _____

STUDENT GROUP LEADERS

Name of Student Group Leader A: _____

Date of Birth: ____ / ____ / ____

Name of Student Group Leader B: _____

Date of Birth: ____ / ____ / ____