



11th EOD Workshop 2026

19 - 20 May 2026,
Hotel X-BIONIC, Samorin, Slovakia

Workshop Application Form

Should you have any questions or any issues during the registration, please send a message to e-mail: eodws2026@eodcoe.org

I intend to participate in the event

Personal Details ¹		
Last (Family) Name		
First (Given) Name		
Nationality		
ID number (ID card, Passport, etc.)		
Service (Army, AF, Navy, Marine corps, SOF)		
NATO rank/grade (e.g. LTC/OF-4)		
Current position within the home organization/unit (e.g. 1st EOD Platoon)		
Email address (preferred contact)		
Cell phone number (incl. country code)		
Home/Parent Unit/Organisation Details		
Name of Unit (e.g. 5th Armoured Bgde)		
Country		
City		
ZIP code		
Street number ²		
P.O.Box ³		
Phone Number (incl. country code)		
Website (optional)		
Email Address of the unit		
Interest in Delivering a Presentation During Block ¹		
Block 1 EOD in the Shadows of Conflict Zones	Title of the presentation	Duration (in mins)
Block 2 EOD Field Adaptations	Title of the presentation	Duration (in mins)
Block 3 Advanced Technology for EOD	Title of the presentation	Duration (in mins)
Block 4 Building EOD Partnerships	Title of the presentation	Duration (in mins)
Consent for Use of Photographic and Audiovisual Material		
I agree / I do not agree that photographs and video recordings of me taken during the event may be used by the EOD Centre of Excellence and its governing or affiliated institutions for publication in print, digital, and social media formats.		
Travel Arrangements		
Mode of travel	air	car train
Arrival / date and time		
Departure / date and time		
Your reserved hotel		
Icebreaker (on 19 May 2026 in the evening) - I will participate	yes	no
Any remarks/requests		

¹ Use only **English characters** to fulfil the form

² If your organisation uses the street number for mailing

³ If your organisation uses P.O. Box for mailing