

International performance competition dedicated to the nine arts

REGISTRATION FORM

Please fill in and send what requested to the Festival Secretary's Office email: direzione@cinema-arte.it

Registration will be considered valid only if complete.

Performance title _____

Country of origin _____

Performance duration _____

CONTACTS

Name/Surname of the Artistic Director _____

Address _____

Post code /City _____

Country _____

Phone number _____

Email _____

Name of the Artistic Company _____

Name/Surname of the Artists _____

DECLARATION

I declare that I have read and accepted the Festival Regulations.

Date _____

Signature _____

Pursuant to art.13 of Legislative Decree 196/2003 on privacy and European Regulation 679/2016 – GDPR, we inform that the personal data collected will be used to be included in mailing lists and to send information and promotional material of the Festival. According to what established by the Law, the participation in the Competition implies, on the part of the Author, the authorization to the processing, by computer or not, of personal data and their use by the Organizing Committee.