



EXHIBITION REGISTRATION FORM

NAME & SURNAME:

TAX CODE:

BORN ON _____

ON _____

RESIDENT IN: _____ N° _____

CITY _____ COUNTRY _____ CAP _____

EMAIL: _____

PHONE/CELL _____

TITLE OF WORK N. 1: _____

TECHNIQUE & SUPPORT: _____

DIMENSIONS: _____

YEAR OF EXECUTION: _____

PRICE OF THE ARTWORK: _____

TITLE OF WORK N. 2: _____

TECHNIQUE & SUPPORT: _____

DIMENSIONS: _____

YEAR OF EXECUTION: _____

PRICE OF THE ARTWORK: _____

SIGNATURE

You hereby authorize the processing of personal data pursuant to art.13 of Italian Legislative Decree 196/2003 and art.13 GDPR 679/16.