

APPLICATION FORM – MASTERCLASS NAPOLINOVA

Personal data

Surname	
Name	
Date of birth	
address	
C.A.P.	
City	
Mobile	
E-mail	

Registration request:
(es. Piano – Leonid Margarius – from 20 to 30 August 2024)

Instrument	
Teacher	

The undersigned interested party, by signing this letter, expresses free consent to the processing of his/her personal data pursuant to art. 13. Legislative Decree No. 196 of 30 June 2003.

This form must be sent no later than the expiry date relating to the discipline as indicated in the announcement by e-mail: segreteria@associazionenapolinova.it attaching the receipt of payment of the registration fee made by bank transfer as requested in the regulation.

Date

Signature