Inscription Form

To be sent to:

master class montal legro 19@gmail.com

| Name | Surname |
|------------------------------|--|
| Place of birth | Date of birth |
| Address | |
| Telephone | Email |
| I hereby ask to be accepted | ed in the cello masterclass of Maestro Luca Franzetti in |
| Montallegro, Rapallo (GE) | from 22/07/2019 to 05/08/2019 as: |
| □ Effective participant | |
| □ Listener | |
| In attachment please rece | rive a photocopy of my ID and a receipt of the inscription fee |
| For the above 18 years old | l students: |
| Signature | |
| Here I allow the use of my | personal data (by the low Number D.LGS n 196/2003: |
| Signature | |
| For the under 18 years old | l students: |
| Name | |
| Surname | |
| | |
| Under my parental respon | sibility with this declaration I authorize my son/daughter to |
| take part in the cello mas | terclass from 22/07/2019 to 05/08/2019 held by Maestro Luc |
| Franzetti. | |
| With this declaration I into | end to dismiss Mr Luca Franzetti from any civil and penal |
| responsibility for any acci | dents in which my son/daughter would be implied, either as |
| responsible or as a victim. | |
| Signature | |
| Here I allow the use of my | personal data (by the low Number D.LGS n 196/2003 |
| Cianatura | |