## **Inscription Form**

## To be sent to: masterclassmontallegro21@gmail.com

Name	Surname
Place of birth	Date of birth
Address	Telephone
Email	
I hereby ask to be accepted in th	ne cello masterclass of Maestro Luca Franzetti in Montal
legro, Rapallo (GE) from 01/08/2	2021 to 13/08/2021 as:
• Effective participant	
• Listener	
In attachment please receive a p	photocopy of my ID and a receipt of the inscription fee.
For the above 18 years old stude	nts:
Signature	
Here I allow the use of my person	nal data (by the low Number D.LGS n 196/2003):
Signature	
For the under 18 years old stude	nts:
Name	
Surname	<del></del>
Father/Mather/Tutor of	
Under my parental responsibility	with this declaration I authorize my son/daughter to
take part in the cello masterclass	s from 01/08/2021 to 13/08/2021 held by Maestro Luca
Franzetti.	
With this declaration I intend to	dismiss Mr Luca Franzetti from any civil and penal re-
sponsibility for any accidents in v	which my son/daughter would be implied, either as re-
sponsible or as a victim.	
Signature	
Here I allow the use of my person	nal data (by the low Number D.LGS n 196/2003)
Signature	