REGISTRATION FORM – CAMPUS minors of 25y FIUGGI GUITAR FESTIVAL 2013

Name and Sur	rname		
Place of birth_		Date of birth	YY:
Address			
Mobile phone also of a parent if m	(required)inor of 18y		
E-mail (require	d)		
	cipate in the following act	tivities of the Fiuggi Guitar Festival 16 to 2	20 July 2014:
Associazione 'No Banca di Credit IBAN: IT 07 M BIC: CCRTIT2	ovamusica e Arte', o Cooperativo di Fiuggi, 08550744410000018430 TS00		cipation fee to the bank account
VERY IMPORT John Smith CAM		urpose of bank transfer Name of the Parti	cipant and type of master (ex.
Date	SIGNATURI	E OF A PARENT	
	giinternationalguitarfestiva	required for subscription) al.com/privacy_policy.pdf	

Deadline for applications: July 10th