

Premio Le 5 Stagioni – **REGISTRATION FORM**

This form must be submitted fully completed along with the design materials listed in section 7 of the Contest Rules.

Name Family Name
Born in Date
Address
Postcode City..... Country
Phone..... Cell Phone
Profession
E-Mail

I would like to participate, at the conditions stated in the Rules, to the contest “Prize Le 5 Stagioni” in the Category (select only one):

- Opening** **Concept**

Acting as:

If **single designer**, please indicate your professional qualification (architect, engineer, designer ...):

If **representative of a team**, please indicate the name of the team:

.....
and the name of the co-authors and their professional qualification:
.....
.....

If **employee of a contract furnishing company**, please indicate the Company’s name:

and the names of the co-authors (if any) and their qualification:
.....
.....

I agree with the Rules of the contest and authorize the use of my personal data

City and Date

Readable signature

.....

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