

APPLICATION FORM FOR DANCERS

(to be clearly filled in capital letters)

FORM TO BE READ AND SIGNED BY EACH DANCER OR SCHOOL RESPONSIBLE

- The undersigned releases the Organization Verona in Dance from any kind of liability for any damage to persons or property occurring in the practice of dance during the competition;
- The undersigned exempt the organization from any kind of liability for any loss, theft or damage to personal items or valuables brought into the places of the competition;
- The undersigned declares to be in possession of a medical certificate of good health and constitution;
- The undersigned agrees to the processing and use of his personal data and image for the following activities instrumental to the achievement of institutional goals: diffusion through the press, television and the Internet, published, utilized for the purposes of promotion and marketing;
- The undersigned waives any right in any copyright of representation and any compensation for the participation in the competition.

FIRST NAME LAST NAME

DATE & PLACE OF BIRTH

PERMANENT ADDRESS (Street, town, zip code, province, country)

.....
.....

TELEPHONE E- MAIL

DANCE COMPANY, GROUP OR SCHOOL WHERE REGISTERED

.....

SIGNATURE

ADDENDUM TO BE SIGNED FOR MINORS

THE UNDERSIGNED

MOTHER/FATHER OF

AUTHORIZES HIS/HER SON/DAUGHTER TO PARTICIPATE TO "SHAKESPEARE IN DANCE 2015"

FIRMA