
PARTICIPATION FORM

Dati dell'Azienda Partecipante

Company name: _____

VAT Number: _____

Registered Address: _____ (Street, City ZIP Code,
Province)

Company Contact Person: _____

Phone Number: _____

Email Address: _____

Participation Details

Photography Contest Title: _____

Brief Description of the Photography Project: _____

Company Declaration

By signing below:

- We declare that we have read and accepted the official rules of the photography contest.
- We declare that we have read and understood the information on the processing of personal data in the official regulations and we explicitly express our free consent to the processing and communication of company data and images provided to the categories of recipients indicated, within the limits and for the purposes indicated in the information itself.
- We guarantee that the photographs presented are original and do not violate the rights of third parties.

Signature of the Legal Representative:

Date: _____