

## APPLICATION FORM

surname ..... name .....

photo

place and date of birth .....

nationality .....

address .....

e-mail ..... telephone .....

admission **student** course of **Contemporary Techniques**

1st week

2nd week

admission **student** course of **Pedagogy**

1st week

2nd week

admission **student** course of **Choreography**

1st week

2nd week

admission **auditor** 1st week  2nd week

short cv .....

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- To participate at the campus Uni-tanz it is necessary to pay a deposit of **€ 100** on CC of Association Koreoproject, Iban **IT73A0307502200CC8500255061**, complete this form and send it via email to **koreoproject@gmail.com** with receipt of payment.
- To participate at the campus as auditors it is necessary to pay a deposit of **€ 50** on CC of Association Koreoproject, Iban **IT73A0307502200CC8500255061**, complete this form and send it via email to **koreoproject@gmail.com** with receipt of payment.
- The remaining amount will be paid at the beginning of the campus. ➤ In case of cancellation the deposit will not be refunded.
- Association Koreoproject proposes **10%** discount for inscriptions received within **June 15, 2014**.
- **10%** discount for students who participated to **Campus 2013**. (discounts are not combined)
- Deadline for inscriptions **July 31, 2014**
- Ass. Koreoproject reserves the right to reject applications after it has been reached the maximum number of inscriptions.
- Association Koreoproject reserves the right to make changes to schedules and disclaims any responsibilities for damage to persons or property that may occur before, during and after the lessons.
- It is strictly prohibited to make videos or take pictures throughout the campus. Association Koreoproject reserves this right and can make free use of photographic and audiovisual material product.

DATE..... SIGNATURE.....

I have read the privacy policy under Article 13 D. Decree n.196/03 and I give my consent. I also declare that I'm aware of the information contained in the article 11 and 13 of the Legislative Decree no., and consent to the processing of my data.

DATE..... SIGNATURE.....