



Registration form

In the Art of Summer

July 5 to 26, 2019

Full name: _____

Address: _____

Telephone: _____

E-mail: _____

Is it your first participation to *In the Art of Summer*? _____

If so, how did you hear about the event?

Which techniques do you use?

How do you want to be contacted?

E-mail: _____ By phone: _____

You will receive a confirmation by e-mail or phone, depending on your preference.

You will receive the event details by e-mail.

However, if you have asked to be contacted by phone, we invite you to get the documents at the library.

In the Art of Summer welcomes all artists, beginners to professionals.

Signature of the participant