

REGISTRATION FORM - FIUGGI GUITAR COMPETITIONS 2025

CONCERT SOLOIST CATEGORY

Name and Surname _____

Place of birth _____ Date of birth _____ YY: _____

Address _____

Mobile phone (required) _____

Email(required) _____

Requests to participate to the Fiuggi Guitar Competition 20th July 2025:

➤ Category E ☐

To COMPLETE registration, it is required, after filling out the form, to pay the participation fee to the bank account :

**Associazione 'Novamusica e Arte',
Banca di Credito Cooperativo di Fiuggi,
IBAN: IT 73 H 0871674441000019843085
BIC: CCRTIT2TBCL**

and send copy of transfer and this form to the email: fiuggiguitarfestival@gmail.com VERY IMPORTANT!!! Specify in the purpose of bank transfer Name of the Participant and Category (ex. : John Smith - Competition Cat. E)

Date _____ SIGNATURE (of a parent if minor of 18y) _____

Privacy policy (read it and make a cross – required for subscription) YES () NO () http://www.fiuggiinternationalguitarfestival.com/privacy_policy.pdf