

Alexander Polishchuk Masterclass 2-8 August 2024 in Milan

Application Form

Name:.....

Surname:.....

Nationality:.....

e-mail address:.....

Phone number:.....

I would like to take part in Alexander Polishchuk Masterclass as

- active participant
- passive participant

(signature).....

I hereby give consent for my personal data included in my application to be processed for the purposes of the recruitment process.

(signature).....