Inscription Form

To be sent to:
masterclassmontallegro@gmail.com

Name_____Surname_____

Place of birth_____Date of birth_____

Address_____Telephone_____

Email_____

I hereby ask to be accepted in the cello masterclass of Maestro Luca Franzetti in Montallegro, Rapallo (GE) from 28/07/2025 to 10/08/2025 as:

- Effective participant
- Listener

In attachment please receive a photocopy of my ID and a receipt of the inscription fee.

For the above 18 years old students:

Signature_____

Here I allow the use of my personal data (by the low Number D.LGS n 196/2003):

Signature_____

For the under 18 years old students:

Name_____

Surname_____

Father/Mather/Tutor of_____

Under my parental responsibility with this declaration I authorise my son/daughter to take part in the cello masterclass from 28/07/2025 to 10/08/2025 held by Maestro Luca Franzetti.

With this declaration I intend to dismiss Mr Luca Franzetti from any civil and penal responsibility for any accidents in which my son/daughter would be implied, either as responsible or as a victim.

Signature_____

Here I allow the use of my personal data (by the low Number D.LGS n 196/2003)

Signature_____