

Registration

International Academy of Arts
17 rue Haute
F - 06220 Vallauris

Name: _____

Christian name: _____

Code postal, adresse : _____

Date of birth: _____

Sex: _____

Nationality: _____

Telefon: _____

Fax: _____

Mobile: _____

E-mail: _____

Master courses – 1 week = 250 Euro

choice of main focus: _____

Artist in Residence

1 month Appartement / Atelier 800 Euro

2 months Appartement / Atelier 1600 Euro

Date of arrival / time: _____

Place/Date: _____ Signature: _____