**Application Form – 1st OPEN CALL MuralartUM 2020**

August 21, 2020

------------------------------------------------------------------(location/area)

|  |  |
| --- | --- |
| Name and surname of the author / group representative: |   |
| Art pseudonym (if any): |   |
| E-mail address |   |
| Phone  |   |
| Project description (max. 500 characters) |  |
| Notes, other information… |  |

* I agree with project repairs within 1 year since the realization.
* I agree with the project medialization.
* I agree with the use of personal data pursuant to Act No. 101/2000, on personal data protection, solely for the needs of the Open Call.

Signed in………………………….date………… Signature……………………….