



# Registration Form – »FBZ art award«

I would like to register for the for the FBZ art award. Furthermore, I agree with the publication of my works in the form of photographs and contributions in radio, print and social media as well as television in the context of the "FBZ art award".

Name → \_\_\_\_\_

Address → \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone → \_\_\_\_\_

E-mail → \_\_\_\_\_

I agree with the tender conditions → \_\_\_\_\_

Signature artist

Submitted work

Title → \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Year → \_\_\_\_\_

Size → \_\_\_\_\_

Value → \_\_\_\_\_

Technique → \_\_\_\_\_



Forschungs- und  
Behandlungszentrum für  
psychische Gesundheit

**Stiftung Kleine Kunstdialog West/Ost**

# Artist statement