

Registration Form – »FBZ art award«

I would like to register 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	\rightarrow					
Address	\rightarrow					
Phone	\rightarrow					
E-mail	\rightarrow					
I agree with the tende conditions.	er	\rightarrow				
						Signature artist
I became aware of tender via this platfor		\rightarrow				
			Submitt	ed work		
Title	\rightarrow					
Year of Creation	\rightarrow					
Format	\rightarrow					
Value	\rightarrow					
Technique	\rightarrow					



Artist statement