

MUSIC TOURISM WORKSHOP
Ischia – 05/06/2009
10,00 am – 5,00 pm

Application Form

Organization

Denomination _____

Representative Name and Surname _____

Other Participants Name and Surname _____

Address Street _____ n° _____ CAP _____ City _____

Province _____ Region _____ COUNTRY _____

Pref _____ Phone _____ Fax _____

Mobile Phone _____ E-mail _____

Web site _____

Operator

- Apt/Promotion Corporation Tour Operator Travel Agency Tourist Group
 Cultural Events Society Show Agency Theatre Cultural Association
 Other

Main Client Typology

- Groups Individuals School Young Advanced Age

Offering

- Packages Tour Concerts Other Proposal? _____

What kind of musical events do you propose?

Please write in a clear legible way, in capital letters

Deadline to send the form : 10 of April 2009

The compilation of this form implicates the authorization to the treatment of personal data according to D. L. 30/06/2003 n. 196

Date

Stamp and Sign

The Credit

N° 1 participant € 125,00 + IVA = € 150,00

For any other participant € 80,00 + IVA = € 96,00

The Adhesion quote has to be paid to :

B&N Communication

BANK TRANFER IBAN: IT 64 V 07601 11500 000078544350

Object of payment : ***Credit for music tourism workshop 2009***

The application form and the payment copy need to be sent to this e-mail :
info@turismomusicale.it or to fax number +39 081.901727

The adhesion quote included the single room in the Hotel reserved from 4th June to
departing day 7th June. The treatment is B&B and the Hotel is situated in the central
part of Ischia.

Please sent your adhesion to the address info@turismomusicale.it, enter the date:

10/04/2009

Following we kindly ask you to leave your dates for the invoicing :

Society _____

Address _____

CAP _____ City _____ Province _____

P.IVA _____

Phone _____