

REGISTRATION FORM - RAVI 2017

IDENTITY FORM

NAME, FIRST NAME

ADRESS

PHONE

EMAIL

WEBSITE

DATE OF BIRTH

NATIONALITY BELGIAN YES NO

If no, please state what country you come from

ARTISTIC DISCIPLINE

DESIRED PERIOD

CATEGORY :

- FROM INSIDE THE FEDERATION WALLONIA-BRUSSELS
- FROM OUTSIDE THE FEDERATION WALLONIA-BRUSSELS