



Ar.Vi.Ma. Artist Residency 2025 DECLARATION ATTACHED TO THE APPLICATION FORM

I, the undersigned:

Name: _____

Surname: _____

Date of birth: _____

Address: _____

Phone: _____

E-mail: _____

DECLARES

- that, in case of my winning, the work produced during the Artist Residence Residency 2024 will remain the property of AR.VI.MA.

Place and date _____ Signature _____