DESIGN CENTRUM ČESKÉ REPUBLIKY

MODEL

icograda

Registration number

			/2004

APPLICATION FORM

Young Package 2004

Name of the entry _____

Designer _____

Surname and first name _____

Address, Postcode _____

Phone, e-mail _____

Co-designer his/her _____

share in cooperation (%) _____

Surname and first name _____

Address, Postcode _____

Phone, e-mail _____

Age category ☐ high school student ☐ college undergraduate ☐ designer up to the age of 30

Affirmation

I solemnly affirm that I am entering my own original work for the Young Package 2002 Competition, and by attaching my signature I express my agreement with the competition rules.

In _____ Date _____ _____

Signature

Name of school _____

Year _____ main subject _____

Supervised by _____

Address of school _____

Phone, fax, e-mail _____

Young Package 2004

In _____ Date _____ _____

Signature and Stamp of the school

embax PRINT LIBERA™ OLŠANSKÉ Ruční papírna PAPÍRNY Velké Losiny