

FORMAT FOR EVENTS IN ARTERIA

CREATION AND ARTISTIC DEVELOPMENT

REGISTRATION CODE

1.Name

Paternal Surname	Maternal Surname	Name(s)
Place and date of birth		Nacionality

2.Address

	Street	
Municipality	Num. State	Z.C.
Telephone	Email Address	

3.Event Discription

Event Program

To whom is intended?

4. Duration of the event

How long does the event last?

5. Materials

Required Materials for the event (Chairs, tables, whiteboard, furniture, illumination)

6. Cost

Suggested salary for the organizer

Salary of each guest artist

7. Referencias y material digital que correspondan a los artistas invitados en participar (video, photos etc..) enviarlas al correo : info@arteriachiapas.com

8. Referencias personales (contactos)

10. Observaciones