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| **ENTRY APPLICATION FORM FOR iMAPP 2015 PROJECTION MAPPING COMPETITION** | | | | | | | | | | | | | | |
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|  | Name of the applicant | | |  |  | | | | | | | | |  |
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|  | Applicant's address | | |  |  | | | | | | | | |  |
|  | Country | | |  |  | | | | City |  | | | |  |
|  | Postal code | | |  |  | |  |  |  |  |  |  |  |  |
|  | | | | | | | | | | | | | | |
|  | Telephone | | |  |  | | | | |  |  |  |  |  |
|  | Skype | | |  | | | | |  |  |  |  |  |
|  | E-mail | | |  | | | | |  |  |  |  |  |
|  | Website | | |  | | | | |  |  |  |  |  |
|  | | | | | | | | | | | | | | |
|  | Short description of the applicant  (max 100 words) | | |  |  | | | | | | | | |  |
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|  | Name of the contact person | | |  |  | | | | | | | | |  |
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|  | Contact person's address | | |  |  | | | | | | | | |  |
|  | Country | | |  | | | | City |  | | | |  |
|  | Postal code | | |  | |  | | | | | | | |
|  | | | | | | | | | | | | | | |
|  | Telephone | | |  |  | | | | |  | | | | |
|  | Skype | | |  | | | | |
|  | E-mail | | |  | | | | |
|  | Website | | |  | | | | |

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|  | Title of Artwork | | |  |  | | | | | | | | |  |
|  | | |  | | | | | | | | | |
|  | | |
| Concept description | | |  |  | | | | | | | | |
| (max 250 words) | | |
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| References | | |  |  | | | | | | | | |
| (Three best works) | | |  | | | | | | | | |
| Youtube/vimeo links | | |  | | | | | | | | |
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| Date | |  | | | | | Signature | | | |  | |
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