

Andrea Ceraso ROME AWARD 2025 5th edition



APPLICATION FORM

(all fields in the form are required)



IMAGOSONORA

	IIV	IAGOSONORA				
Name:	Surname:					
Date of birth:						
Place of birth:						
Nationality:						
Address:						
Email:						
Phone:						
Title(s) of the piece(s) and time length:						
How did you hear about the competiti						
□ Facebook □ Instagram □ C	•	Composers.site				
□ Ulysses platform □ E-mail □ 0	Other, specify:					
By signing this application I accept all						
AWARD and the processing of personal data in accordance with the current						
European regulations*.						
I confirm to have sent by e-mail (info@	<u>shelivesmusic.it</u>) the followi	ng documents:				
1) 0 ()						
1) Score(s)						
2) Short biography	(a) NOT a a manual a man					
3) Commentary of the submitted work						
4) mp3 recording (if any) - NOT compulsory						
5) Receipt of the entry fee payment						
6) This application form signed						
Place and date:						
ridee and date.						
Signature:						
* We inform you, pursuant to art. 13 and 14 of the GD personal data relating to you, are processed in corconfidentiality obligations. The purpose of the procession email contact after your explicit consent, or by writing to the processing of your data will take place with communicated to the data processors in charge of manathird parties or transferred to third countries. The Data Concessary to fulfill the indicated purposes. Pursuant to the	npliance with the law, as well as ng of your data consists exclusively in o one of the email contacts on the She automated and computerized meth- ging the service in question. Your dat ontroller stores and processes persona	in compliance with the n sending a reply to your Lives website. ods. Your data will be ta will not be disclosed to l data for the time strictly				

the interested parties have the right to request the correction or cancellation of the data processed or the limitation of

their treatment. The Data Controller is Associazione She Lives.