

Application form European Shoemaker Competition 2024

CLOSING DATE REGISTRATION AND PAYMENT: **DECEMBER 31 2023**CLOSING DATE HANDING IN SHOES: **JANUARY 18 2024**PLEASE FILL IN WITH CAPITAL LETTERS AND BALLPOINTPEN

Do not fill in (for administration only)		
Date received		
Indentification		

Information of participant		
Last Name	Maiden name (in case it applie	es)
First name(s)		Gender ☐ Male ☐ Female
Email address		
Street	Street Number Ph	one number
City	Zip code Co	untry
For self-employed: self-employed number: LI	FAVE BLANK FOR FORFIGNERS	
For employer: registration number Camber of Commerce		
Company name and address:		
For student: name teacher		
For student: name study and year of study		
Category		
I am registering for: Competition group:		
Custom made shoes		
☐ Repair work ☐	Employers/ self-employed and employe	es
☐ Students 1 st year		
☐ Students 2 nd year		
ONE COMPETITION GROUP AND PRODUCT OR TARGET GROUP MAY BE CHECKED PER APPLICATION FORM		
Sign and date		
By signing this document I declare that the pieces I am entering <u>have not entered or have been displayed at another contest.</u> I declare that <u>I have done the work all by myself</u> , and <u>I agree to the terms of the contest rules</u> .		
Date:	Place:	
Signature participant	Signature employer (in case it applies)	Signature teacher (in case it applies)

^{*} The entered data will be used in accordance with our privacy policy, see www.schoenmaker.nl