



Application form European Shoemaker Competition 2027

CLOSING DATE REGISTRATION AND PAYMENT: **DECEMBER 31 2026**

CLOSING DATE HANDING IN SHOES: **JANUARY 15 2027**

PLEASE FILL IN WITH CAPITAL LETTERS AND BALLPOINTPEN

Do not fill in (for administration only)

Date received	
Identification number	

Information of participant

Last Name Maiden name (in case it applies)

First name(s) Gender Male Female

Email address

Street Street Number Phone number

City Zip code Country

For self-employed: self-employed number: LEAVE BLANK FOR FOREIGNERS

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 employees

Students 1st year

Students 2nd 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 have not entered or have been displayed at another contest. I declare that I have done the work all by myself, and I agree to the terms of the contest rules.

Date: <i>Signature participant</i>	Place: <i>Signature employer (in case it applies)</i>	<i>Signature teacher (in case it applies)</i>
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* The entered data will be used in accordance with our privacy policy, see www.schoenmaker.nl

Only fully completed and signed application forms will be processed.

Send back form and shoes to: **Secretariat European Shoemaker Competition**
Havenstraat 41 A, 1736 KD Zijdewind The Netherlands OR info@schoenmaker.nl