



# Shinano-omachi Asahi AIR

## Application form

Please fill in all items except Registration No.

Declaration of Consent to Program Conditions: Please check the following boxes to give consent.

If you do not consent to all of the following, the application will be rejected.

The copyright of the work, plan and project produced during the residence belongs to the	<input type="checkbox"/> Agree
The participating artist's previous material (portfolio, collection of works, etc.), profile and submitted pictures will be open to the public as project archives and can be used for Studio publicity in the media, printed matter and the website. The record of the residence program such as pictures and videos can be used for publicity as well.	<input type="checkbox"/> Agree
Please credit any related material produced during the residency to "Shinano omachi Asahi AIR".	<input type="checkbox"/> Agree
The project contents will be decided upon following consultation with the director and staff during	<input type="checkbox"/> Agree
I agree to abide by the facilities usage agreement, get along with other participants and visitors	<input type="checkbox"/> Agree

\*Personal data will not be used for any purpose other than that required for this open call program. Personal data will not be provided to any third party.

Applicants Information		
NAME (representative's name)		
Date of Birth	(day)/ (month)/ (year)	Male <input type="checkbox"/> Female <input type="checkbox"/>
Current Address		
Nationality		
Telephone No.		
Mobile phone No.		
Email Address		
URL		
Enter the following items in case of a group.		
Name of Group		
Name of all members:		

