



**25° Festival Internazionale Della Magia  
Repubblica di San Marino  
March 15 - 16 - 17 2024**

**Registration form Trofeo Arzilli**

**FIRST NAME:** \_\_\_\_\_ **LAST NAME:** \_\_\_\_\_

**ARTIST NAME:** \_\_\_\_\_ **COUNTRY** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_ **MOBILE PHONE** \_\_\_\_\_

**DURATION** \_\_\_\_\_ **PREPARATION TIME** \_\_\_\_\_ **CLEARING TIME** \_\_\_\_\_

**KIND OF MAGIC:** .....

**TECNICAL NEEDS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The organization will provide lights and an amplification system, (TABLE 80 X 80 CM IN PLASTIC FOR CLOSE UP) everything else will be provided by the artist. Special needs not specifically indicated on this form will not be admit. The artist will provide to attach music, lights plan (if any), links to you tube of the performance and a couple of photos in stage hold. The membership request will be considered only when it is accompanied by everything required.**

**DATE**  
\_\_\_\_\_

**SIGNATURE**  
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