



SURNAME: _____

NAME: _____

BIRTH CITY: _____ PROVINCE: () BIRTH DATE: // _____

RESIDENCE: _____ PROVINCE: () _____

ADDRESS: _____ ZIP CODE: _____

PHONE NUMBER: _____ E-MAIL: _____

TAX CODE : _____

REQUESTS

Enrollment in SFIMS

TITLE OF THE SONG : _____

SONGWRITERS : _____

CATEGORY:

PERFORMER SINGER-SONGWRITER

SOLO ARTIST DUO BAND

I DECLARE

- That I have read and accepted the festival's regulations in all its parts.

- That I am responsible for the work and hold the rights to it, and that this registration form can be considered as a "release for screening" as required by SIAE.



- That the contents of the submitted song do not violate current laws and that the work does not contain defamatory content.

- I authorize the Committee of the SENZA FRONTIERE INTERNATIONAL MUSIC STARS organization, in accordance with Law 196/2003 and subsequent amendments, to process personal data, including electronically, and to use the information provided for all purposes related to the Competition and associated events.

To be attached to this and sent via email to segreteriaeventi2025@yahoo.com:

- The song, preferably Mp3 or Wav format.
- A brief artist/duo/band presentation (mandatory).
- A stage photo (mandatory).

DATE

SIGNATURE

Send to: segreteriaeventi2025@yahoo.com with the subject: REGISTRATION

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Radi Idea





SPC
Music
PUBLISHING

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sky
CANALE 809

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