

2 / C A N D I D A T E S H E E T

TO BE RETURNED BEFORE THE 25 TH MARCH 2004

EUROPEAN GRAND PRIX IN SHOE DESIGN

THE INTERNATIONAL SHOE MUSEUM
2 Rue Sainte-Marie - 26100 ROMANS - FRANCE



SURNAME:

FIRST NAME:

DATE OF BIRTH: NATIONALITY:

ADDRESS:

POST CODE: TOWN:

COUNTRY:

PERSONAL TELEPHONE: MOBILE:

I finished my training in

at.....since the.....

I am currently in training (enclose proof)

I am without full-time employment:

Other situation:

(*) Tick the box where applicable

I undertake to finish the whole project : drawing + shoe.

I authorize the SAINT-CREPIN ASSOCIATION to present my drawing and the designed shoe at the "LET'S REVIEW OUR CLASSICS" Exhibition at the International Shoe Museum from 29th October 2004 to the 2nd January 2005.

(Keep a copy of this document)

I certify that all the information given above is correct.

Date:

Signature: