

**Africa e Mediterraneo Award
for Best Unpublished Comic Strip by African
Author
2009-2010**

Application form

Last Name: _____ **First Name:** _____

Address: _____

City: _____ **ZipCode:** _____ **Country:** _____

Nationality: _____

Home Phone: _____

Mobile Phone: _____

E-Mail: _____

F **M** **Age:** _____

Occupation: _____

Comics education: _____

Title of the comic story submitted: _____

Section:

Free Subject Comic Story

Comic Story on sport

Comic Story on poverties

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

No. Pages: _____; **technique:** _____;

Name and nationality of the script-writer (if different from the cartoonist):

How did you learn of the Africa e Mediterraneo Award?:

RELEASE

My signature below attests:

1. to the accuracy of the information supplied above.
2. that the material submitted is my original work.
3. to my understanding of the purposes, rules, guidelines and conditions of the Africa e Mediterraneo Award and to my acceptance of them.
4. that I am eligible for the competition, and that I will not become ineligible prior to the conclusion of the competition.

Signature of Applicant: _____ **Date:** _____

The information supplied will be used under Art. 10 Rule 675/96 and used only within the purposes of the Africa e Mediterraneo Association.