



APPLICATION FORM *Young* LPC - PREMIO GALLETTA 2025

Surname_____First name_____

Place of birth_____Date_____/_____/_____

Address_____Postal/ Zip Code _____

City_____Country_____

Phone_____E-mail_____

The undersigned asks to apply for admission as "LIVORNOCLASSICA associato ordinario 2025" and participation at:

YOUNG LPC 2025 Premio ENRICO GALLETTA Cat. B

The undersigned accepts the conditions of the competition as specified and gives consent to treatment of personal data according to art. 13 and 14 of GDPR – Rulement UE 2016/679 about privacy.

Date_____

Signature _____