

APPLICATION TO *THE ART OF MAKING ART. ART HISTORIAN PRACTICES* COURSE

APPLICANT CONTACT INFORMATION:

1. FULL NAME
2. AGE
3. E-MAIL
4. PHONE NUMBER
5. EDUCATIONAL ORGANIZATION

PLEASE ANSWER THE FOLLOWING QUESTION:

WHY DID YOU DECIDE TO TAKE PART IN THE COURSE?

APPLICANT'S PARENTS CONTACT INFORMATION:

1. FULL NAME
2. E-MAIL
3. PHONE NUMBER

CONTACT S:

Ekaterina Vladimirtseva

kids@garageccc.com

+7 (495) 645-05-20

+7 (967) 037-17-68