

Name:	Surname:	Date of birth (dd/mm/yyyy):
I will participate in the 9 th ed	lition of the Design Awards a	s:
- single		
- group		
Yours faithfully,		
(Signature)		
To be completed only in the	case of participation as a gro	оир.
I declare that I am the group	leader of the project:	
Other group members:		
Name:	Surname:	Date of birth (dd/mm/yyyy):
Name:	Surname:	Date of birth (dd/mm/yyyy):
Name:	Surname:	Date of birth (dd/mm/yyyy)
		D : (11:11 (11/ /)
Name:	Surname:	Date of birth (dd/mm/yyyy):
Yours faithfully,		
(Group leader signature)	(Signatures of the group members)	

RIVA INDUSTRIA MOBILI S.p.A. – RIVA 1920