

REGISTRATION FORM
at 22nd International Archival Day

Trieste, 22th ó 23th October 2012

NAME

SURNAME

INSTITUT

ADDRESS

TOWN

ZIP-CODE

COUNTRY

OFFICE PHONE

PERSONAL ADDRESS

TOWN

ZIP-CODE

COUNTRY

PHONE

E-MAIL

CONSENT

According to the Italian law by decree 196/2003, I undersigned _____
consent to the managing, transmitting and circulating of my personal data by the Italian State Archives in
Trieste for the sole aims of this Institution.
Trieste, October 22th ó 23th 2012.

Name

Surname

Full signature