

Please print out you participation form and send to Euro Art Center together with you mini prints. Thank you

INTERNATIONAL MiniPrint de Sarajevo

EuroArtCenter

ARTIST _____

Address _____

City _____ ZIP _____

Country _____ Phone _____

E-mail / Web address: _____

Mail to:
 EuroArtCenter
 Skiftesv. 14
 352 53 Växjö
 SWEDEN

Date _____ / _____ of _____ Signature: _____

One year's membership fee with the right to participate in the International Mini Print de Sarajevo is free

I wish to participate in INTERNATIONAL MINI PRINT de SARAJEVO, and submit my works to the acceptance Jury, accepting the participating conditions expressed in the entry forms

Title num.1 _____	Medium _____	Price _____
Title num.2 _____	Medium _____	Price _____
Title num.3 _____	Medium _____	Price _____
Title num.4 _____	Medium _____	Price _____

To participate in INTERNATIONAL MINI PRINT de SARAJEVO, pleas send the PARTICIPATION FORM to Euro Art Center together with you miniprints and all documentation requested in "num. 4" of entry form and the corresponding before November 15th, to: EuroArtCenter, Skiftesv. 14, 352 53 Växjö, SWEDEN

Please type or print legbly in roman alphabet Please xerox or print if you need addittional copies for other interested artists

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NEWS AGENCY SARAJEVO

update 24.10.104.

