

APPLICATION FOR SPACES AT THE MUSEU DE MENORCA

IDENTIFICATION

Surname(s)

First name

ID type

ID number

DNI

NIE

Passport

Cell phone

E-mail

Type of representation

On own behalf

In representation of:

Entity

CIF (Tax ID no.)

Mailing address

PC

City

Province

REQUEST

The use of the conference room / the courtyard of the cloister for this entity to carry out the following activity:

Conference

Roundtable

Presentation

Concert

Seminar

Details of the event:

Equipment available (only for the conference room):

Computer

Projector

Microphone

Name of speaker/lecturer/artist

Event title

Subject

Date and time of the event

Month

Year

Digital signature

Date

Authorised by the Museu de Menorca. Digital stamp:

Date