



PARTICIPATION FORM – SPONSORS – 2020-2024 CONTEST

I am habilitated to present the following association/organisation as a sponsor of the Video Awards event.

- On behalf of the following association/organisation (name):

- My name and surname _____
- My email address _____
- City _____
- Country _____

I certify that this association/organisation accepts to sponsor the ARWARDS event for an amount of 500€.

I have read and accepted the guidelines of the contest and I shall send this participation form to the following address before January 31st, 2024: arwa.info@yahoo.com.

I certify that I am habilitated to represent the aforementioned association/organisation.

- Signature _____ Date (xx/yy/zz) _____