



An die Landesinnung Wien der Schuhmacher Straße der Wiener Wirtschaft 1 1020 Wien Fax: 0043 1 514 50 92354

Registry Deadline March 2, 2020

Award for the Crazy Shoe 2020 Vienna

Name:	
Street / nr:	
Post Code / City:	
Country:	
Telephone:	
E-Mail: (important)	

Attention, please fill out clearly in capital letters!!!

□ I will not participate

□ I will participate in the contest

I wish to participate in the "Award for the Crazy Shoe 2020 Vienna" and hereby certify by my signature that I have made the submitted shoe myself.

I accept with my participation that the 15 best shoes are presented after the ceremony a year in the Vienna Shoe Museum. An earlier return or to take the shoes home after the ceremony is excluded.

I agree that

1. the data given by me (first name, surname, address, telephone, e-mail-address and the other data about my "Crazy Shoe") will be processed by the Vienna State Guild of shoemakers.

2. Photographs and filming will be made during the ceremony, which can be used to document the Award for the Crazy Shoe 2020 Vienna on the internet (wko.at, social media) and for broadcasts (local, regional, national media, WKO media). I agree, that photos and video recordings showing me during the event are publicated. My photos of the working steps concerning my "Crazy Shoe" may also be publicated.

If I register an extra person for the ceremony, I hereby declare that I am authorized to make this registration and to submit a corresponding declaration of consent for data protection. I can revoke my agreement at any time.

I agree with these terms. (agreement necessary for the organization of the Award for the Crazy Shoe 2020 Vienna), a participation in the Award for the Crazy Shoe 2020 Vienna is unfortunately not possible without this agreement

I accept the terms of participation.

If I am in the top 15 selection

□ I will come alone

 $\hfill\square$ I will come with an extra person

City and date

Signature