



Application form to GROUPS

Designation of the group: _____

Number of elements: _____

Name of the responsible of the group: _____

Address: _____

City/Town : _____ Country: _____

Email: _____ Mobile: _____

This form must be sent to: nunofigueira65@gmail.com

As soon as possible, please send:

- Copy of Identity Cards, Citizen Cards or Passports of all the elements of the group
- Photo of the group
- Title of the songs
- Videos

Payments should be made by bank transfer to the following account:

Owner of the Account: Nuno Figueira

Name of the Bank: Millennium BCP

IBAN: PT50003300000008902136305

BIC/SWIFT: BCOMPTPL