

**APPLICATION FORM SUBMISSION DEADLINE: 31<sup>TH</sup> MAY 2015**

Gallery:

Tax Identification N°:

Address:

Post Code:

Town/City:

Province: Country:

Telephone:

Mobile:

Fax:

E-mail:

Web site:

Contact:

Year Gallery was established:

Gallery Artist:

Plan for ARTESANTANDER 2015 stand presentation:

Date:

Signature: