***10th 'Picturale' 2024***

INSURANCE

# **Categories A & B**

Please complete this form so that we can insure your works/illustrations.

Illustrator’s name: …………………………………………………………………………………………………….......................

Address: ………………………………………………………………………………………………………………………...................

Telephone: …………………………………………………………………………………………………………………....................

E-mail: ……………………………………………………@…………………………………………………………….......................

Title /name of the work/illustration + value

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***category*** *a (* ***established illustrators*** *)*

*valUE…………………………………………………………………………………………………*

***categorY*** *b*  ***(YOUNG talents )***

*valUE………………………………………………………………………………………………..*

# ………………………………............................... ……………………………................

Name/Signature Date

vzw PICTURALE, Rode Broeckstraat 126, 9600 Ronse, Belgium

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