

Ill.mo Sig.Presidente  
della Provincia di Ferrara  
Castello Estense  
44100 Ferrara

***Application to use the Imbarcadero Rooms – Castello Estense of Ferrara***

The undersigned \_\_\_\_\_  
Of \_\_\_\_\_  
(indicate the exact name of the Institution of Association represented)  
resident/with offices in \_\_\_\_\_ Street: \_\_\_\_\_  
Telephone \_\_\_\_\_ fax \_\_\_\_\_  
Tax Code \_\_\_\_\_  
VAT Reg. No. \_\_\_\_\_

***REQUESTS***

The use of the following space(s) in Castello Estense:

- |  |  |
|--|--|
| <input type="checkbox"/> COURTYARD       | <input type="checkbox"/> IMBARCADERO THREE |
| <input type="checkbox"/> IMBARCADERO ONE | <input type="checkbox"/> IMBARCADERO FOUR  |
| <input type="checkbox"/> IMBARCADERO TWO | <input type="checkbox"/> OTHER _____       |

**For the realization of the following initiative:**

- CONFERENCE
- EXHIBITION WITH ADMISSION CHARGES
- EXHIBITION WITH FREE ADMISSION
- SHOW WITH ADMISSION CHARGES
- SPORTING EVENT
- OTHER (specify whether reception, press conference, business presentation) \_\_\_\_\_

**Name of the event** \_\_\_\_\_

Special aims of the initiative:

- |                                   |                                      |
|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> SOCIAL   | <input type="checkbox"/> CHARITY     |
| <input type="checkbox"/> CULTURAL | <input type="checkbox"/> OTHER _____ |

Date planned for the event: \_\_\_\_\_

Duration in days: \_\_\_\_\_

Opening hours: \_\_\_\_\_

Days' preparation before the event \_\_\_\_\_

Days' required to clean up after the event \_\_\_\_\_

Special opening hours outside the normal opening hours

(9.30 a.m.-5.30 p.m.) \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_