

**REGISTRATION FORM**  
**ARTIST RESIDENCY PROGRAM – CASA DE MONO FOUNDATION**

Name

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Passport number

.....

Birth date

.....

Nationality

.....

Languages

.....

Place of residence

.....

Current Address

.....

Cell phone number

.....

E-mail

.....

Occupation (e.g. artist,  
curator, researcher,  
choreographer, etc.)

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Links where your work can be  
appreciated (website,  
Behance, social networks,  
etc.)

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How did you find out about  
Casa de Mono's Artist  
Residency Program?

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Length of stay (minimum 1  
month, maximum 6 months)  
(please, specify the desired  
date/month so we can check  
for availability)

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Describe the project you  
would like to work on during  
your residency

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