

**APPLICATION FORM
BRESCIA CARD MUSEUMS&MOBILITY**

SHOP NAME _____

SHOP CATEGORY _____

ADDRESS _____

PHONE NO. _____

E-MAIL _____

WEB SITE _____

WOULD YOU LIKE TO JOIN THE INITIATIVE?:

- YES
- NO

WHICH KIND OF BENEFIT WOULD YOU LIKE TO OFFER?

- GADGETS

Which?

-% DISCOUNT ON ALL ITEMS
-% DISCOUNT ON SOME ITEMS

Which?

—

- OTHER

—

—

Please, fill in the application form properly and send it to customerare@bresciamobilita.it or else call the phone no. +39 030 3061200 to arrange the collection from your business address.

Thank you for your cooperation.