

SUBMISSION FORM

I donate this publication to ZINES OF THE ZONE,
who commits minding the document with care

CONTRIBUTOR

name of contributor :

date of submission :

signature :

PUBLICATION

title :

author (artist / publisher) :

date of publication (mm/yyyy) :

place of publication (city, country) :

e-mail :

website:

type of document :

copies / print run :

dimensions (cm) :

pages:

printing technique :

binding:

description of project:

PLEASE ATTACH THIS FORM / AND SEND THE PUBLICATION TO

ZINES OF THE ZONE
C/O Julie Hascoët
5, rue du Bac
13200 Arles, France