

## EYECAD VR *student license* REQUEST

DEAR

Digital Atom SRL

The undersigned \_\_\_\_\_ University freshman n° \_\_\_\_\_

Email: \_\_\_\_\_ Tel.: \_\_\_\_\_

Fiscal Code (optional): \_\_\_\_\_

### DECLARE

to be a student at the school: \_\_\_\_\_

enrolled in the course: \_\_\_\_\_

ACADEMIC YEAR \_\_\_\_ / \_\_\_\_

### REQUESTS

a (limited) free license of **eyecad VR** software to be used exclusively for educational purposes, also declares to accept the conditions on the privacy policy and the legal information available on the site:

[www.eyecadvr.com/legal](http://www.eyecadvr.com/legal)

Signature

the current date \_\_\_\_\_

\_\_\_\_\_