



OLYMPIC GAMES | OLIMPIADI
OF MUSIC | DELLA MUSICA
INTERNATIONAL COMPETITION

APPLICATION FORM

LAST NAME FIRST NAME MIDDLE NAME

PLACE OF BIRTH (COUNTRY & CITY) DATE OF BIRTH

HOME ADDRESS

CITY STATE ZIP CODE COUNTRY

TELEPHONE FACSIMILE E-MAIL

PLACE OF STUDY (INSTITUTION OR PRIVATE STUDIES) COUNTRY OF STUDY

PLEASE LIST YOUR TEACHER(S) (OPTIONAL)

I WILL BE COMPETING IN CATEGORY: _____ (PLEASE CHOOSE THE CORRESPONDING LETTER)

PLEASE PROVIDE AN ACCOMPANIST FOR MY AUDITION I AM COMPETING FOR THE CRISTIANA PEGORARO AWARD

PLEASE LIST YOUR COMPETITION REPERTOIRE:

1.

COMPOSER WORK OPUS & MOVEMENT

2.

COMPOSER WORK OPUS & MOVEMENT

3.

COMPOSER WORK OPUS & MOVEMENT

4.

COMPOSER WORK OPUS & MOVEMENT

SIGNATURE DATE

If the student is under 18 years of age, a Parent or a Guardian must sign this application