APPLICATION FORM – JUNIOR N	∕IASTERCLASSES				
Last name		First name			
Place of Birth	Date of Birth				
AddressTelephone	City		State	Zip Code	
Telephone	_ Cellular	Fax	E-mail_		
☐ Regular Student ☐ Auditor	Instrument	Teacher	Teacher at the campus		
☐ Student with parent/chaperon ☐ I request the chaperon service ☐ July 17 — July 23 Masterclass ☐ I would like to participate in I would like to participate in ☐ I would like I would lik	ce at an extra cost of € 3 - □ July 24 – July 30 ne Chamber Music progra the Junior Orchestra wi the Junior Orchestra wi	70 Masterclass am – Experience in chambe th final concert July 23 (e:	r music: □ Good □ xtra € 70)		
- Orchestra experience: Goo		Danastona	Data		
Lodging Preference:					
Room: ☐ single ☐ double ☐	•	•	e to share the roon	n with	
Meals: ☐ lunch ☐ dinner ☐	lunch & dinner	on't need meals			
Fill out and send the application form to Cris narniaartsacademy@gmail.com.  Please include:  •copy of payment receipt (Bank transfer to:	NARNIA ARTS ACADEMY, Accour	nt #: 2000 405, IBAN: IT32 B062 201	4 4060 0000 2000 405 – S	WIFT/BIC: BPBAITR1	
• photocopy of I.D. • parent's authorization, if the student is a m • A short resume • Repertoire student wish at +39 335 433784 or mail at narniaartsacad members)	ninor (download the form under thes to study at the Junior Master	classes Program • A short video n	ot to exceed 2 minutes to	be sent via whatsapp	
☐ I've read and accept the term Masterclass website	ns and conditions listed	under "Terms and Condi	tions" on the Narni	a Festival / Junior	
	Date	e Pare	Signature		
Parent's name (if the	he student is a minor)	Pare	ent Signature		