

PROFICIENCY COURSES 2012

APPLICATION FORM

Name _____ Surname _____

Birth Place _____ Birth date _____

Address: Street _____ n. _____

City _____ Postal Code _____ Nation _____

Telephone/Fax _____ Mobile _____ E-Mail _____

Educational qualifications _____

ASKS TO BE ADMITTED AS Registered Student Auditor

TO THE COURSE OF:

Lyric Singing (M° Trombetta, 30/7 – 5/8)

Piano (M° Capurso, 7/8 – 12/8)

Piano (M° De Berardinis, 30/7 – 5/8)

Violin (M° Barrale, 6/8 – 12/8)

Violin (M° Spadano, 8/8 – 12/8)

Alto (M° Ranieri, 6/8 – 12/8)

Cello (M° Berthold, 9/8 – 13/8)

Harp (M° Pierre, 30/7 – 5/8)

Flute (M° Amenduni, 31/7 – 6/8)

Clarinet (M° Travaglini, 30/7 – 5/8)

Sax (M° Di Bacco, 31/7 – 5/8)

Horn (M° Corti, 30/7 – 5/8)

Jazz guitar (M° Lama, 1/8 – 5/8)

Flute Ensemble (M° Rulli, 2/8 – 5/8)

Contemporary music work-shop
(M° Capurso 9/8 – 12/8)

Improvisation techniques
(M° Lama, 1/8 – 5/8)

PROGRAM INTENDED TO BE STUDIED: _____

Required attachment:

- Receipt of payment of the associative quota of 50,00 Euros at the name of Associazione Abruzzese Amici della Musica.
- Musical curriculum and professional activities.

This is to certify that myself have read all the rules, I have agreed with each part of the regulation.

Date _____

Signature _____

DECLARATION OF RESPONSIBILITY (for under aged) I, as _____ of the under aged

_____ who signed this application, give the permission to attend the Proficiency Courses, so

the the Association has no responsibility on the Young:

Signature _____