

PETER THE GREAT MUSIC ACADEMY APPLICATION FORM

Please type or print clearly:

Full Name: _____ Sex: MALE FEMALE

Nationality: _____ Passport Number: _____

Date of Birth (dd/mm/yyyy): _____ Place of Birth: _____

Address: _____

Phone (please include your country + city area code): _____

Mobile: _____ Fax: _____ E-mail: _____

I am applying for the following masterclass:

- January 4-9, 2010** with Maestro ALEXANDER POLYANICHKO (Russia)
- April 4-12, 2010** with Maestro ENNIO NICOTRA (Italy-Russia)
- June/July _____, 2010** with Maestro ALEXANDER POLYANICHKO (Russia)
- August 22-28, 2010** with Maestro ENNIO NICOTRA (Italy-Russia)
- _____ with _____

I would like to be considered as: Active Participant Passive Participant (Auditor)

In case that there are no more Active Participant places available, would you be interested to attend as a Passive Participant (Auditor)? Yes No Maybe

I am applying as a: New Participant Repeat Participant

Please give us your program choices* (2-3 pieces):

*subject to confirmation by the maestro and the orchestra

Applicant's Signature

Date (dd/mm/yyyy)

[PLEASE DON'T FORGET TO COMPLETE PAGE 2]

Training Received:

Conducting Positions:

Awards & Scholarships Received:

Additional Questions:

Do you need assistance with Visa issuance for your trip to Russian Federation? (if YES, please fill in the Visa Application Support Form and send it together with this application)

- Yes No I don't know (I will contact you later if I need help)

Do you need assistance with accommodation while in St. Petersburg?

- Yes . Please send me more information.
 No. I already have my accommodation organized.
 Maybe (I will contact you later if I need your assistance.)

How did you learn about this masterclass (e.g. from **PeterTheGreatMusicAcademy.com**, from an ad in a magazine (and please tell us which magazine), through a referral from a friend or colleague (and please give us his or her name), through an internet search engine (and which one), etc.):
