

The 10th Osaka International Chamber Music Festa

Application Form

Deadline: October 10, 2019

Ensemble Name	Country of Residence

■ Category

Festa
Describe the types of instruments.

■ Name and address of the representative (Who can be contacted)

Name

Address

E-mail:

Tel :

■ Names of the members and their instruments

	First Name	Family Name	Nationality	Instrument	Date of Birth (Month / Day / Year)	Sex
(1)					/ /	M F
(2)					/ /	M F
(3)					/ /	M F
(4)					/ /	M F
(5)					/ /	M F
(6)					/ /	M F

■ How did you hear about this Festa ?

Website Magazine Friends School, Teacher Newspaper

Other Sources ()

■ Ensemble's profile

◇ Month and year of foundation: month: _____ year: _____

◇ Name of teachers / instructors:

◇ Major activities (concerts, competitions, etc.):

◇ Awards and prizes (if any):

◇ Other:

■ Works to be performed

	Composer	Title	Performance time	
1st Round			min.	
			min.	
			min.	
			min.	
			min.	
	Total Performance time (Within 25 minutes)			min.
	Date of recording (/ /2019)		Place of recording ()	
Semifinal Round			min.	
			min.	
			min.	
			min.	
			min.	
	Total Performance time (Within 25 minutes)			min.
	Date of recording (/ /2019)		Place of recording ()	

■ Certification of Recording

I hereby declare that the enclosed recording was made by the ensemble specified above.

Title :

Name :

Signature :
