

# Academy of Historical Pianos

Lusławice, April 29 – May 5, 2018

## APPLICATION FORM

Name: .....

Surname: .....

Date and place of birth:.....

Place of residence: .....

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Mobile phone: .....

e-mail: .....

School/University, grade/year of studies:

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Name of the current teacher:.....

Foreign language knowledge:

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Repertoire prepared for the Academy:

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I declare that I agree to the terms and conditions of the Academy resulting from the Regulations

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date, signature of the participant

Signature of the legal guardian in the case when the Participant is a minor:

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date, signature, phone number