

VII. Triomphe de l'Art music competition

Application form

Discipline: «Chamber Music Ensemble»

First and Last name of each musicians of the Ensemble, his/her age and

his/her instruments in the Ensemble _____

Nationalities of each musician of the Ensemble _____

Dates of birth of each the musician of the Ensemble_____

Places of birth (Town, Country) of each musician of the Ensemble_____

Educational institution of each musician of the Ensemble (School, Conservatory) and its address and contacts (if applicable), teacher

Home address, contact telephone, fax, e-mail of each musician of the Ensemble

Competition program. Please, write the composer name, the official composition name and the duration of each composition

I round

II round

The Ensemble awards and laureateships or/and awards or laureateships of each musician of the Ensemble_____

We'll bring another person with us at the competition (yes-no) _____

If yes, indicate thier Last and First Names, telephone number, e-mail and his or her relation to the musician of the ensemble (mother, father, teacher, etc..)
