

APPLICATION FORM

name, first name

nationality

date and place of birth

city

street

e-mail address

telephone

link to a recent and unedited
video- recording for 1st round

attachment:

- CV and photo
- repertoire list for 1st and 2nd round

I herewith confirm payment of the application fee (60 €) to the account of Barock Vokal Akademie.

I herewith confirm agreement with the terms and conditions of Barock Vokal Akademie and if elected, will participate in the three-week summer programme (28.7.-18.8.2024) .

Bank	Deutsche Bundesbank Filiale Mainz
Beneficiary	Landeshochschulkasse Mainz
IBAN	DE25 5500 0000 0055 0015 11
BIC	MARKDEF1550
Reference	8500-10000-8787681 (name, first name)

place and date

signature