



6. MUSICA SACRA A ROMA APPLICATION FORM



NAME of the group (in native language and in Latin letters)		Country
Address, Street	Zip Code	City
Telephone number	Fax number	
Choir's Email	Choir's Website	
Choir's year of foundation		
Your CONTACT PERSON		
First name Please, add Ms./Mr./Mrs. before the name	Last name	
Address/ Street Write in these fields ONLY if the address is different than the one of the group	Zip Code	City
Email	Telephone number	Mobile number
Your CONDUCTOR		
First name Please, add Ms/Mr/Mrs before the name	Last name	
Address/ Street If the address of your Conductor is the same of your group's address, you don't need to report it here again	Zip Code	City
Email	Telephone number	Mobile number
Does your conductor conduct another participating choir? Please, give details.		



Your STAY

Number of singers (including conductor)	Additional people	Bus drivers	Total people
Arrival date	Departure Date	Total nights	

How will you travel? Please, put an X next to the concerning answer

Coach*	Plane	Train	Car	Other

*Is this coach at your disposal during your entire stay? Yes: No:

Do you need us to arrange your arrival TRANSFER? If yes, please indicate

Transfer from:	
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Do you need us to arrange your departure TRANSFER? If yes, please indicate

Transfer to:	
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Do you need to rent a COACH for your stay? Would you like us to send you an offer?

Please, underline the concerning answer Yes, please No, thanks

What is your desired accommodation category? Please, put an X in the concerning field				Please, indicate the number of rooms you need to book:			
Economy	Standard	Comfort	Superior	SGL	DBL	TPL	MBR

Please, write here eventual notes:

With your signature you agree, in the name of all participants, to accept the conditions of the official announcement.

Place, date	Choir Representative	Conductor

Your PAYMENT via Credit Card

If you would like to pay with credit card*, please indicate your credit card type and put your signature as a form of allowance for the transaction. We will contact you in a separate instance to receive your cc information and proceed with the payment. This form of payment is allowed *only* for the registration fees

VISA	MASTER CARD	Car holder's full name	Signature

Please put an X on your credit card type.

Your PAYMENT via Bank Transfer

We kindly ask you not to detract your bank expenses and to send us the full registration fee. Thank you!



6. MUSICA SACRA A ROMA
International Choir Festival & Competition
July 1 - 5, 2015 Rome (Italy)

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Your chosen Competition Categories

S	Musica Sacra
	S1 – Mixed Choirs
	S2 – Male Choirs
	S3 – Female Voices
SO	Musica Sacra Open Category
MP	Musica Profana
G	Children and Youth Choirs
	G1 – Children Choirs
	G2 – Youth Choirs of equal voices
	G3 – Youth Choirs of mixed voices
GS	Gospel/Spiritual

Please, place an X next to the chosen Category.

In case you compete in more than one category: please, copy the content of this page and paste it below this document, then fill it in with the same modality.

Number of singers:

Age of singers:

From	years
To	years

Your Competition Programme:

	Composer's Last name	Composer's First name	Date of Birth/Death	Title of the Piece	Duration
1.					
2.					
3.					
4.					
5.					
6.					

Please, indicate with an X what pieces have accompaniment and what instruments accompany them:

1.		Accompanied by:
2.		Accompanied by:
3.		Accompanied by:
4.		Accompanied by:
5.		Accompanied by:
6.		Accompanied by:

Your chosen Activities

	EP – Evaluation Performance <i>for non-competing choirs</i>
	EP – Evaluation Performance <i>for competing choirs</i>
	IC – Individual Coaching <i>for all choirs</i>

Your Evaluation Performance Programme

	Composer's Last name	Composer's First name	Title of the Piece	Duration
1.				
2.				
3.				
4.				
5.				

NB: The number of pieces you will perform for your EP depends on your chosen category.

Your Individual Coaching Programme

	Composer's Last name	Composer's First name	Title of the Piece	Duration
1.				
2.				

Do you need any advice on your literature's choice? Please contact Your Publisher:



Porfiri & Horvath Publishers

Tel.: +49 (0) 6403-9784225

E-Mail: office@ph-publishers.com

www.ph-publishers.com

Your Friendship Concert Programme

Please, indicate the type of music of this concert's programme. (Put an X in the concerning field) .

Maximum duration: 20 min. Please, send us the programme of your FC at least two (2) months before the event starts.

Sacred Music Programme		Secular Music Programme	
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Items enclosed to your Application Form

Please, refer to the official Announcement for the specific requirements.
Please put an X next to the attached items. Thanks!

	Proof of payment of the REGISTRATION FEE
	AUDIO RECORDING
	SHORT BIOGRAPHY OF your CHOIR
	PHOTO OF your CHOIR
	MUSIC SCORES FOR Competition Programme
	MUSIC SCORES FOR EP-Evaluation Performance
	MUSIC SCORES FOR IC-Individual Coaching

Please, send the application form to:

info@meeting-music.com

Our contact information:

meeting
music

Musica Sacra a Roma

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