



**CASA TORRE
BONFADINI**
PICCOLO SALOTTO DELLA CULTURA

ENROLLMENT FORM

Masterclass “Give me a feedback”

Participants will have to submit the application by one of these procedures:

- Email: sending the enrollment form in PDF format and a copy of the payment of the enrollment fee to casatorrebonfadini@gmail.com

- Postal service or delivery: delivering/sending with a registered mail the enrollment form and a copy of the payment of the enrollment fee to *Pro Loco Braone c/o Comune di Braone, via Re 2, 25040, Braone (BS) Italy.*

IBAN: **IT56R 03111 54160 000000040193** - Pro Loco Braone.

FIRST NAME (holder of the Group)

SURNAME

NAME OF THE GROUP (only for Chamber music)

DATE OF BIRTH PLACE OF BIRTH

CITY OF PERMANENT RESIDENCE CITIZENSHIP

TELEPHONE NUMBER (+.....)

E-MAIL

INSTRUMENT DO YOU NEED OUR PIANIST?

PROGRAM (free)

AUTHOR	TITLE	MOV.

NUMBER OF MUSIC STANDS YOU NEED

NOTES

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Date

Signature