

Application Form

Please fill the form in block letters or type:

Surname _____ First Name _____

Address _____

Age _____ Sex _____ Nationality _____

Contact details:

Phone _____ E-mail _____

Current musical qualification _____

Institution you study at or graduated from _____

Your instrument _____

You would like to study with Prof _____

Chamber music with Prof (?) _____

Seminar with Prof _____

Attend as listener _____

Works you intend to present at the master classes

Application check list:

CD

CV

Reference letter

One passport photograph

A front-back photocopy of an identity document

Send to:

Application
EILAT INTERNATIONAL MASTERCLASSES
P. O. Box 4262
Eilat 88000
ISRAEL