

APPLICATION FORM for VOKAL ENSEMBLE 8-week trial course

May 14 - July 2, 1x week/60 min, Wednesday afternoon

Student's name:.....

Date of birth:.....

Student's address:

Name of parents:.....

E-Mail:.....

Mobile:.....

Time options: anytime between 3 and 5 pm (yes/no)...../only at.....

Comment:.....

.....

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By signing this application form I agree to the General Terms and Conditions.

Date:.....

Place:.....

Signature: