

# APPLICATION FORM

## May > June 2021



### PERSONAL DATA

Name and surname:

Age:  Taxpayer number:

Address:

Zip code:  -  City:

Phone number:  Mobile phone number:

E-mail address:

### CERTIFICATES AND MUSICAL EXPERIENCE

Musical instrument:  Grade/year:

Attending Music school, orchestra or band:

Certificates:

Academic qualifications:

Have you ever attended a course guided by the City Council of Loures and/or other municipal institution?

No  Yes  Year:  Where?:

**FOR WHICH SESSIONS ARE YOU ENROLLING?** May (online) 8 > 9  June (online) 12 > 13

Listener  Participant

### PIECES THAT YOU ARE GOING TO WORK ON THE MASTERCLASSES

**Important:** The student must send the scores to [dc@cm-loures.pt](mailto:dc@cm-loures.pt)

Date:  /  /

SEND