

Registration form

General Information

On-Line



J I Fest!

Vocal Competition

When filling in this form, please use Roman alphabet and please note uppercase and lowercase!

1 Name of the group :	2 Country:
3 Duo, trio, quartet or vocal ensembles (5-12 persons):	4 Age group:
5 E-mail:	6 Phone:

Contact person

7 <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	8 First name:	Last Name:
9 City:	10 Phone:	
11 E-mail:		

Accompanist

12 <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	13 First name:	Last Name:
14 City:	15 Phone:	
16 E-mail:		

I want to participate in the following activities:

16	<input type="checkbox"/> JSFest vocal competition	up to 10 years)	11-16 years	20+ years mixed
			17-20 years	age group

The following documents are attached:

17	A photo and a brief description (in English 7-10 sentences) of the creative life of the participant
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18	I want to participate in the EVALUATION PERFORMANCE with the program listed below.
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19 Preliminary contest			
No.	Composer's First and Last Name	Title of the piece	Duration
1			
2			
3			

Brief description (in English 7-10 sentences) of the creative life of the participant

Agreement

I hereby declare that we fully accept all conditions of the official announcement documents (Participant Information, Competition Information) in the name of all participants. I understand that participation in the JSFest Vocal Competition is otherwise impossible.

City, Country:	Date:	Name of the participant:	
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Please fill in the registration form, save it on your computer and send it by e-mail: info@semconsulting.fi