



VIOLIN MASTERCLASS WITH BORIS BELKIN

Application form

Blank spaces marked with * must be filled.

Name *

Surname*		Name*
Birth date* (DD/MM/YY)	/ /	Place of birth*
Address*		
Citizenship*	Telephone	number*(+)
E-mail address*		
to Article 3 of the EU Reg. 2 to have received from Calzabigi, 74 – 5712 concerning the proces traditional methods of	the Data Control 5 Livorno (Itasing of persona contact (eg of	oller Associazione "Amici della Musica di Livorno", Via lia) the information ex artt 13-14 reg EU 2016/679 I data for the purposes indicated in the informative not calls with operator, postage) and of automated method
\ \ \		s expressed in the information (available on the website usicfestival.com/livorno/privacy/).
		Signed*

Attach to this Form:

- Curriculum vitae;
- A short video (single grip, duration 5/10 minutes, good audio quality) with a free choice piece via YouTube link, Google Drive or Dropbox.

Web: https://www.livornomusicfestival.com/livorno/ Contact: infolivornomusicfestival@gmail.com