APPLICATION FORM





 Fifth International Individual Vocal Competition of Sacred Music

**ARS ET GLORIA 2023**

Karol Szymanowski Academy of Music in Katowice, 10.03.2023 / 12-14.04.2023

*to be filled-out electronically, signed, scanned and sent via email to:* *xpawel@go2.pl*

**PERSONAL INFORMATION:**

First Name and Surname: Voice type: Category:

Residential Address:

Telephone number: E-mail address:

PESEL number (if applicable): Nationality:

Bank account number:

**ADDITIONAL INFORMATION:**

School / University / Course Type / Year:

Full name of the main Instructor/Advisor:

Main prizes and honorable mentions in vocal competitions:

First and Last Name of one’s own accompanying Pianist:

I would like to collaborate with a Pianist (provided by the hosts) in the 2nd and 3rd stage of the competition: YES / NO (please circle)

**DESCRIPTION OF PARTICIPANT’S REPERTOIRE:**

*Please include information in the following order: full name of the composer, a chosen piece (title of the piece, aria’s incipit / the title of the oratorio-cantata / opera piece from which the aria was chosen), time of duration*

**I stage -** *performance time: up to 15 minutes*

1.

2.

3.

URL address with recording of the above tracks

**II stage -** *performance time: up to 15 minutes*

1.

2.

3.

**III stage -** *performance time: up to 10 minutes*

1.

2.

The registration will be completed only after signing the statement below:

*By registering for this Competition, I confirm having read the Competition Rules and Regulations*

*and I agree to comply with all the rules, information and provisions set forth herein. I agree to have my personal information processed as necessary for the needs of the Competition.*

 *Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Participant’s signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

FIFTH INTERNATIONAL





INDIVIDUAL SACRED MUSIC VOCAL COMPETITION

**A R S E T G L O R I A**

Karol Szymanowski Academy of Music in Katowice, 10.03.2023 / 12-14.04.2023

**INVOICE**

To be completed only if an invoice is needed

*please complete electronically only*

1. ……………………………………………………………………………….

Buyer / University / School / Organization / Individual

1. ………………………………………………………………………………

Name and surname of the Participant (who’s being paid for)

On behalf of the Buyer please provide an invoice

INVOICE details:

|  |  |
| --- | --- |
| Buyer’s Name: */Name and surname* *in case of an individual/* |  |
| Address: |  |
| NIP:*/for firms/companies/* |  |

**NOTE:**

**a) If the invoice is to be created for the BUYER, but the payment is being made by the PARTICIPANT, then it is necessary to include a note stating that the payment is being made on behalf of the Buyer, by writing: ,,w imieniu........ (BUYER’s name)”.**

**b) Ultimately it is the BUYER that covers the costs of participation (where he/she can, but does not have to be the payer nor a participant).**

**c) An electronically filled-out INVOICE needs to be completed and sent via email to the Chancellor of The Academy of Music in Katowice:** **kanclerz@am.katowice.pl**, **on the same day as the payment being made for participation in the competition.**