

**CONDUCTING MASTERCLASS**  
**WITH**  
**MARCO ANGIUS**  
**and**  
**AltreVoci Ensemble**

**FONDAZIONE TEATRO FRASCHINI**  
**April 15th-18th, 2024**

APPLICATION FOR ACTIVE STUDENTS

the undersigned

Surname and name \_\_\_\_\_

Fiscal code: \_\_\_\_\_

born in \_\_\_\_\_ on \_\_\_\_\_ and resident in \_\_\_\_\_

Address \_\_\_\_\_ n° \_\_\_\_\_ CAP \_\_\_\_\_ Prov.  
(\_\_\_\_\_)

Domicile (if is different from residence) \_\_\_\_\_

telephone number \_\_\_\_\_ cellphone \_\_\_\_\_

email address \_\_\_\_\_

Qualifications held \_\_\_\_\_

requests to participate in the Masterclass by enclosing the application:

- **Curriculum Vitae** including the studies completed and/or in progress and any professional experience in the field of music. The CV must also include **full personal data and contact details** and must be accompanied by a **signed authorisation to process personal data** for the sole purposes of the masterclass itself.
- **Video**: indication of streaming or download links
- Signature for acceptance of the regulations.

Place and date, \_\_\_\_\_

Signature \_\_\_\_\_

Enrolment in the course is formalised by completing and accepting this form and will be completed by attaching the payment receipt upon successful selection.

# CONDUCTING MASTERCLASS

WITH

**MARCO ANGIUS**

and

**AltreVoci Ensemble**

**FONDAZIONE TEATRO FRASCHINI**

**April 15th-18th, 2024**

## APPLICATION FOR AUDITORS

the undersigned

Surname and name \_\_\_\_\_

Fiscal code: \_\_\_\_\_

born in \_\_\_\_\_ on \_\_\_\_\_ and resident in \_\_\_\_\_

Address \_\_\_\_\_ n° \_\_\_\_\_ CAP \_\_\_\_\_ Prov.  
(\_\_\_\_\_)

Domicile (if is different from residence) \_\_\_\_\_

telephone number \_\_\_\_\_ cellphone \_\_\_\_\_

email address \_\_\_\_\_

Qualifications held \_\_\_\_\_

requests to participate in the Masterclass by enclosing the application:

- **Curriculum Vitae including the studies completed and/or in progress and any professional experience in the field of music. The CV must also include full personal data and contact details and must be accompanied by a signed authorisation to process personal data for the sole purposes of the masterclass itself.**
- Signature for acceptance of the regulations.

Place and date, \_\_\_\_\_ Signature \_\_\_\_\_

Enrolment in the course is formalised by completing and accepting this form and will be completed by attaching the payment receipt upon successful selection.

AltreVoci Ensemble  
Associazione culturale / musicale  
Via Lattanzio Gambara 39,  
25122, Brescia (BS)  
P.IVA: 03809640984 C.F.: 98173650171

AUDIO VIDEO DISCLAIMER

the undersigned

Surname and name \_\_\_\_\_,

occasional collaborator about the concert held at \_\_\_\_\_ on date

\_\_\_\_\_

with the Associazione AltreVoci Ensemble,

born in \_\_\_\_\_ on \_\_\_\_\_,

resident in \_\_\_\_\_ address \_\_\_\_\_ n° \_\_\_\_\_  
prov. \_\_\_\_\_,

Domicile (if is different from residence) \_\_\_\_\_ address  
\_\_\_\_\_ n° \_\_\_\_\_ prov. \_\_\_\_\_,

AUTHORISE

the use of images and/or videos showing him/her during activities and events organised with the AltreVoci Ensemble Association, for publication on the Association's website and social channels and for the purposes of presentations of the Association itself.

FORBIDS

Use in cases and contexts that could be detrimental to one's personal dignity.

The images, videos and their use are to be considered free of charge.

Place and date, \_\_\_\_\_

Signature for acceptance \_\_\_\_\_