



TEBALDI LEGEND COMPETITION

APPLICATION FORM

(please send to

info@parmaoperart.com)

Personal data:

Surname: _____ Name: _____

Street: _____

City: _____ Province: _____

ZIP code: _____ Nation: _____

Phone: _____ Email : _____

Date of birth: _____ Male _____ Female _____

Voice:

Soprano:___ Mezzo-soprano:___ Alto:___ Tenor:___ Bariton___ Bass___

Along with the application form, all candidates must send:

- a) A short CV written in one page;
- b) A payment receipt of 50 €, reason for payment: “Tebaldi Legend Contest”

I have read and accepted the rules and conditions for contestants taking part in this competition and I authorize the use of my personal data exclusively for the use of the Association Parma OperArt.

Date: _____

Signature _____