

Italian Conducting Academy

Gilberto Serembe, Founder and Teacher

APPLICATION FORM

send to: segreteria@italianconductingacademy.com

Name

Surname

Place and date of birth

Address and Post Code

Town

Country

Nationality

Telephone / Mobile

e-mail

Candidate's principal studies and degrees

Details of the Bank Transfer of € 200

Passport / ID Card Details

☐ Three-Year High Training

☐ Two-Year Master Course

☐ Auditor

Date

Signature for Registration and acceptance of Regulation

Under the Law 675/96 and D.P.R. 318/99 I consent to the processing of personal data. Yes ☐