BELCANTO ACADEMY OPERA STUDIO 2024

REGISTRATION FORM

The undersigned		, born in
on	, of nationality	, resident in (indicate legal
and tax residence, as sl	hown in the attached docum	ent)
Postcode	in	document attached (passport is
required for citizens of	f non-EU countries)	no,
, .		my Opera Studio 2024 program.
If selected, you con	nmit to accept and sign	the rules of participation in the courses.
Requests to hold t	the selection audition i	n (tick the chosen location):
	February 2024 atro Traetta, 28 Februar rrucino Theatre, 29 Feb	
Proposed program	for the audition:	
1)		
2)		
3)		
Attach to this for	m:	
copy of identity dcopy of the tax cocopy of the receip	ode (or other document of the bank transfer o	certifying the personal identification code)
(place)	(date)	(legible signature)