



**NYCKELHARPA CAMPUS with ANNETTE OSANN
 17 -20 August 2017**

Application form

Class: Nyckelharpa Camp

Teacher: **ANNETTE OSANN**

Your name:

Date of birth:

Permanent Address:

Zip Code:

City:

Phone:

e-mail:

(your personal data will be used only for the internal organization of the courses)

Do you wish to enroll as a regular participant or as an auditor?

I'm regularly enrolled at the Universities of Bologna, Vienna or Trossingen (yes or no):

I'm regularly enrolled at the normal classes of Marco Ambrosini, Michael Posch, Maria Luisa Baldassari or Lorenz Duftschmid (yes or no):

If interested in housing at the University Residential Center, specify the requirements:

Single or double room:

Lunch in the cafeteria (yes or no):

date of arrival:

date of departure:

(this information is required only for organizational reasons, it is essential to confirm your booking by phone at +390543444309)

Fill this form and send it to **info@bertinoromusica.it**