APPLICATION FORM

International Flute Seminar Bruges Intensive Course 2024

First name :		Last name :	
Nationality :		Date of Birth :	
Address :			
Postal Code :	City :	Co	untry :
Phone :		Mobile :	
E-mail-address :			
☐ I apply for the Flu	ite Intensive Course : whole v	week / Tuesday / Wednesday /	Thursday / Friday / Saturday / Sunday *
☐ I apply for the Pic	colo Intensive Course : whole	e week / Tuesday / Wednesda	y / Thursday / Friday / Saturday / Sunday *
Students concerts tak	e place on Friday 8 PM and S	Saturday 8 PM	
I have played the flute	e / piccolo since I a	am a flute teacher / profession	al / amateur / junior / I study the flute / I am under 18
If applicable: whom d	o you study with ?		
or whom did you stuc	ly with ?		
•		olo piece or study) you intend	to play ?
What is your motivation	on to take part in this course	:	
What is your native la	nguage ?	. What other foreign language	es do you speak ?
Languages of instruct	ion can be in English, Dutch,	French, German.	
Are you on a diet ? Ye	s / No * If so, what is your die	et ?	
* delete as appropria	te		
COURSE FEE			
☐ Piccolo Intensive☐ Sheet package : €	Course (including tuition, full £ 17,-	poard, lodging in single rooms) I board, lodging in single roon 15 th of July 2024) : € 60,- per da	ns) : € 760,-
Complete and send y Applicants will be info	our application form and a vi ormed of the results of their a	for piccolo and six participants ideo recording before May 1, 2 application before the end of N e a bill. After reception of the r	2024 to info@ifsb.be
PERMISSION TO USE	PHOTO OR VIDEO MATERI	IAL	
		*	brochures, newsletters, posters) and digital images
Date :	Signatu	ure :	