



Maria Perchiazzi Guaraldi

APPLICATION FORM
DANZFEST
CATTOLICA, JULY 12-24 2010

Please complete the following application form and return to Maria Perchiazzi Guaraldi by email (maria@guaraldi.it) or fax (+39 0541 791316). Upon acceptance to the program, you will receive the following information: a letter of acceptance, tuition/housing fee details, methods of payment, and Danzfest guidelines.

PERSONAL INFORMATION:

Please indicate your preferred enrollment status. STUDENT AUDITOR AUDITION

Are you a university student? YES NO Grade/Year:

NAME: SURNAME:

DATE OF BIRTH:/...../..... AGE: PLACE OF BIRTH:
DD MM YEAR

HOME ADDRESS:

PASSPORT NUMBER: ISSUING COUNTRY:

TELEPHONE: EMAIL:

NAME OF CURRENT DANCE SCHOOL or PROGRAM:

Check here if you are an unaccompanied minor and would like to request an on-site chaperone for an additional fee.

EMERGENCY CONTACT INFORMATION:

NAME: TELEPHONE:

HOME ADDRESS:

COURSE SELECTION: Danzfest is designed as a **2-week program** (Partial enrollment requests for the first week only will be reviewed and accommodated based on availability).

Course Number	Classical/Contemporary	Dates
#	from to
#	from to
#	from to
#	from to

BRIEF RESUMÉ: Please include information about your dance background.

