

Registration form  
General Information



*J I Fest!*

On-Line

Vocal Competition

**When filling in this form, please use Roman alphabet and please note uppercase and lowercase!**

<b>1</b> Name and the last name of the soloist:	<b>2</b> Country:
<b>3</b> Date of Birth:	<b>4</b> City:
<b>5</b> E-mail:	<b>6</b> Phone:

**Contact person**

<b>7</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	<b>8</b> First name:	Last Name:
<b>9</b> City:	<b>10</b> Phone:	
<b>11</b> E-mail:		

**Accompanist**

<b>12</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	<b>13</b> First name:	Last Name:
<b>14</b> City:	<b>15</b> Phone:	
<b>16</b> E-mail:		

**I want to participate in the following activities:**

17	<input type="checkbox"/> JSFest vocal competition	10-11 years old	15-17 years old	20+ years old: (* professionals )
		12-14 years old	18-20 years old	20+ years old: (* amateurs )

**The following documents are attached:**

18

A photo and a brief description (in English 7-10 sentences) of the creative life of the participant

19

I want to participate in the EVALUATION PERFORMANCE with the program listed below.

20 Preliminary contest			
No.	Composer's First and Last Name	Title of the piece	Duration
1			
2			
3			

Brief description (in English 7-10 sentences) of the creative life of the participant

### Agreement

I hereby declare that we fully accept all conditions of the official announcement documents (Participant Information, Competition Information) in the name of all participants. I understand that participation in the JSFest Vocal Competition is otherwise impossible.

City, Country:	Date:	Name of the participant:	
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Please fill in the registration form, save it on your computer and send it by e-mail: [info@semconsulting.fi](mailto:info@semconsulting.fi)