

# Application form

Please send the completed and signed application form

**by letter** Landesmusikakademie Hessen  
Schloss Hallenburg, Gräfin-Anna-Straße 4, 36110 Schlitz, Germany,  
**by fax** +49 (0) 6642 9113 29 or  
**by email** info@lmah.de

Herewith I sign up definitely for following seminar/course:

Title \_\_\_\_\_

Date \_\_\_\_\_

## Personal details

Salutation \_\_\_\_\_

First name, last name \_\_\_\_\_

Institution \_\_\_\_\_

Date of birth \_\_\_\_\_  pupil/student  
(Please attach appropriate supporting evidence!)

Street, Number \_\_\_\_\_

Postcode \_\_\_\_\_

City \_\_\_\_\_

Country \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_  
(After the application deadline you will get an email containing more information.)

Instrument \_\_\_\_\_

## Catering

regular food  vegetarian

vegan  allergies: \_\_\_\_\_  
(Vegans/allergy sufferers pay 3 Euro extra charge per day.)

**Accommodation** (if available)

- Shared room (two to four beds per room)

together with: \_\_\_\_\_

- Combination room (single room with shared bathroom)  
(5 Euro extra charge per day)

- Single room (10 Euro extra charge per day)

If necessary (according to course description), please attach **further information**  
(e.g. musical curriculum vitae, course repertoire).

- information attached       no attachment

For application for a **course for chamber music**:

I am a member of an already existing ensemble with following participants:

(Please note that they also have to send in an application form.)

**Additional notes:**

I agree to the forwarding of my **personal data** to the course participants (for example to form a carpool).

- Yes       No

- I have read and accept the **conditions of participation**.

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
(Minors require signature of parent or legal guardian)