Application Form – International Youth Competition
"Suoni di Venezia" Edizione 2025

Please complete all sections and send by June 15, 2025 to:
erasmus.bip@conservatoriovenezia.eu

PARTICIPANT DETAILS

Full Name: _____

Date of Birth (dd/mm/yyyy): _____

Nationality: _____

Instrument / Ensemble (e.g., Piano, Quartet, etc.): _____

Category (Soloist – A,B,C,D,E / Chamber Music – F):_____

Age at the time of the competition: _____

(Chamber Music only) NAMES OF ENSEMBLE MEMBERS

1. _____
2. _____
3. _____
4. _____
5. _____

REPERTOIRE

Titles of pieces and approximate duration:

1. _____ Durata: _____ minuti
2. _____ Durata: _____ minuti
3. _____ Durata: _____ minuti
4. _____ Durata: _____ minuti
5. _____ Durata: _____ minuti

CONTACT INFORMATION

Email: _____

Phone Number: _____

DOCUMENTS TO BE ATTACHED

– Copy of ID
– High-resolution photograph

Rules

Scoring out of 25 points

Possible ex-aequo awards

The jury will select participants for the gala concert

Jury decisions are final

The Organizing Committee is not responsible for jury decisions

The organization reserves the right to use photo/video material for promotional purposes without compensation

Each participant and ensemble is entitled to a 10-minute acoustic rehearsal in the concert hall on the day of the competition

Submission of the application implies full acceptance of these rules.

Place and date:

_____

Signature of the participant (or parent/guardian if underage):

_____