



EUROPEAN YOUTH ORCHESTRA “FERRUCCIO BUSONI”
Application form
to be submitted no later than May 15, 2025

First name: _____

Family name: _____

Nationality: _____

Place of birth: _____

Date of birth: _____

Present address: _____

Telephone: _____ Mobile: _____

E-mail address: _____

I hereby apply to the
European Youth Orchestra “Ferruccio Busoni”

- I grant my authorization, without any additional charge, for the performance, the broadcasting through the media see fit by the organization, and the use of audio-video, photographic and documentary material, even for an eventual record publication;
- I accept all the competition terms and conditions;
- I accept all the terms and conditions of the use of personal data (See Art. 13 of D. Lgs. 196/2003 and Art. 13 of Legislation UE 2016/679).

Place, date

Original or digital signature

ATTACHED

- Applicant's Curriculum
- Digital copy of ID stating age and nationality
- Two recent medium/high-resolution digital photos