

**THE COMPETITION WILL BE HELD IN THE**

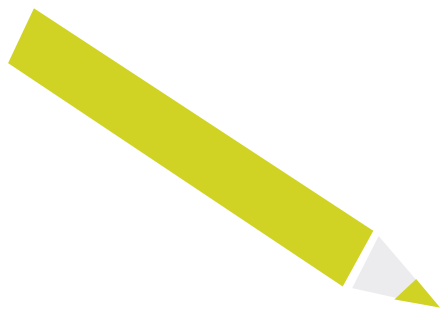
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**PLEASE SEND YOUR APPLICATION TO**

Kneza Mislava 18  
HR - 10 000 Zagreb  
Phone: +385 (01) 45 01 206  
Fax: +385 8 (01) 46 11 807  
e-mail: epta@kdz.hr

**EPTA** 7th EPTA - International Competition for Young Pianists

**Application form**



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**SURNAME**

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**NAME**

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**CITIZENSHIP**

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**DATE OF BIRTH**

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**PLACE OF BIRTH**

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**MUSIC EDUCATION (CONCLUDED AND ONGOING)**

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**TEACHERS**

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**INSTITUTION**

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**ADDRESS**

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**PHONE/FAX**

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**E-MAIL**

**HOTEL ACCOMMODATIONS** yes no

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**NUMBER OF PEOPLE**

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**ROUND I**

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**ROUND II**

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**FINAL ROUND**

**LIST OF WORKS APPLIED FOR THE COMPETITION**

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**PLACE AND DATE**

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**SIGNATURE**

The application form must be filled neatly. Unreadable, unclear or incomplete forms will not be taken into consideration.