

Music Adventure Travel
Application to Participate
 (please fill out one application for **each participant**)

Date of application: _____ Type of application: individual couple family group other

Tour	Destination of tour:	Tour dates:
	Work to be performed:	

Contact Information	Name of individual	Last (family):	First:	
	Date of Birth	Month: Day: Year:		
	Email Address			
	Telephone	Home:	Work:	
	Fax	Home:	Work:	
	Postal Address	Street:	State/Province:	
			Zip/Postal Code:	
City:		Country:		

Performer Category (check one)	singer – please indicate voice type: soprano alto tenor bass instrumentalist – please indicate instrument: non-performer
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Musical Background	Please mark the category which best describes your musical background: <input type="checkbox"/> professional <input type="checkbox"/> semi-professional <input type="checkbox"/> dedicated amateur <input type="checkbox"/> occasional performer <input type="checkbox"/> no previous experience <input type="checkbox"/> non-performance applicant	On the back of this application, or another sheet of paper, please describe your musical background, experience, and training, such as: <input type="checkbox"/> with what group(s) have you performed? <input type="checkbox"/> how frequently? how recently? <input type="checkbox"/> list some of the works you have performed <input type="checkbox"/> have you performed as a soloist? what did you perform? <input type="checkbox"/> studied privately? <input type="checkbox"/> any professional studies or training?	
	<u>Instrumentalists must also submit a recorded audition</u> on one of the following media (audio cassette, CD, or VHS video cassette). There is no required work. Please try to send at least two works or excerpts of contrasting tempo. Audition material cannot be returned.		

Accommodations	Hotel Preference	1st choice:	2nd choice:	
	Room Occupancy	shared double family single (single supplement applies)		
	Shared double	I need a roommate, help me find one		
		I have a roommate (name of roommate):		
Family	we would like to be in one room we need _____ rooms we request a rollaway bed (additional charge may apply)	Names of family members travelling together		

Return of Application and Deposit

A deposit of \$400 US per person is due upon application. In the case of a family sharing a single room, a single deposit of \$800 US will cover the entire family. Deposits in the form of personal checks or bank drafts should be made payable to: Music Adventure Travel.

Applications, deposits and instrumentalist audition material should be sent to: **Music Adventure Travel**
 Telephone: (617) 625-6598 Fax: (617) 625-6544 130 Highland Road
 Email: info@MusicAdventureTravel.com Andover, MA 01810 USA (rev. 03.2)