



www.youth-classics.com

11th Swiss International Music Academy 2020 Application Form

Please fill out the form completely and in clear handwriting.

Personal information:

Last name: _____

First name: _____

Gender: ☐ male ☐ female

Date of Birth: Day: _____ Month: _____ Year: _____

Nationality: _____

Instrument: _____

Street: _____

ZIP/Town: _____

State /Country: _____

Home phone: Country Code: _____ City Code: _____ Number: _____

Mobile phone: Country Code: _____ Number: _____

E-Mail: _____@_____

! We mainly use email and whatsapp for communication. Please check your email, including the SPAM-INBOX, and whatsapp regularly!

Do you need a visa to enter and stay in Switzerland? yes ☐ no ☐

If you need a visa, please send us a copy of your passport with this application.

Choice of Course:

☐ Course solo and chamber music

Requested teacher (solo course): _____

☐ I would like YOUTH CLASSICS, if possible, to propose a place with another SIMA faculty if I do not get a place with my preferred teacher.

☐ I would not like to participate in YOUTH CLASSICS if I cannot be taught by my preferred teacher.

☐ I do not want to attend the chamber music course (same fee)

☐ I would like to attend the course „viola as minor instrument for violinists“ with Jose G. Flores. I will bring my own instrument (only for violinists – course fee remains the same)

☐ I do not want to attend the course „viola as minor instrument for violinists“ with Jose G. Flores



www.youth-classics.com

Solo course repertoire (necessary information for accompanists)

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

Chamber music repertoire (only possible if you already know with whom you play)

1. _____
2. _____
3. _____

Name of chamber music partners (if known)

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

Accommodation

I would like to share a double-room with the following person (if possible):

Food

☐ normal ☐ vegetarian ☐ vegan

I have the following food intolerance _____

Language

Do you speak English? Yes ☐ No ☐

Do you speak German? Yes ☐ No ☐

Comments/special requests:



www.youth-classics.com

Who should be notified in case of an accident or other unusual occurrence:

Name: _____

Relationship: _____

Phone: _____ Country Code: _____ Number: _____

E-Mail: _____

I include with this application:

(Incomplete applications will not be processed.)

- ☐ application form
- ☐ agreement about rules for participants at the YC SIMA 2019
- ☐ a recent picture
- ☐ C.V.
- ☐ Bank receipt proving the payment of the application fee (CHF 100.00 / Euro 100.00)

(The application fee will be refunded, in case the applicant can not be given a place at the 10th SIMA. The application fee will not be refunded, in case the applicant cancels his/her participation.)

- ☐ CD or DVD (if the application is sent by post)
- ☐ Passport copy (only for visa)
- ☐ The link of my YouTube-video is: _____

☐ I have auditioned in a live audition and my teacher of choice has already guaranteed me a place in his/her class.

☐ Whatsapp is installed on my mobile phone

☐ I will arrive on July 10th at the "Musikinsel Rheinau" and depart from Zurich on July 19th after the final concert at the Zurich University of the Arts. (The concert will be finished at around 8 p.m.) The fee for 9 nights and 3 meals a day is 890 CHF / 820 Euro including all lessons, courses, workshops and concerts.

☐ I will arrive on July 10th at the "Musikinsel Rheinau" and depart from Zurich on July 20st after breakfast. Please book a room (1 bed in a double room) for me at the IBIS Budget in Zurich (next to the Zurich University of the Arts) for the night from July 19th to July 20st. The fee for 10 nights and 3 meals a day is 950 CHF / 870 Euro including all lessons, courses, workshops and concerts.

I have taken note that participation in the 11th Swiss International Music Academy is only possible over the entire period, with arrival on July 10th 2020 and departure on July 19th or on July 20th 2020.



www.youth-classics.com

Please note:

All parts of the application must reach YOUTH CLASSICS latest **by May 10th, 2019.**

Signature (of parent, if applicant is under the age of 18)

Place: _____ Date: _____

Send (by post or email) to:

YOUTH CLASSICS

Neue Dorfstrasse 9

CH-8135 Langnau am Albis

Switzerland

philip.a.draganov@youth-classics.com