

Galoyan Art GmbH

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GALOYAN ART AUDITION APPLICATION FORM

Name:	
Surname:	
Date of Birth: (DD.MM.YYYY) Sex:	O m O f O other
E-Mail:	
Phone number:	
Address:Street, House Number, Appartment Number	
Zip Code, City, Country	
The following documents can be sent by email to audition@galogagency's application portal: • Filled out and signed application form and consent form • Copy of passport or identity card (PDF format) • Artistic photos (JPEG or PNG file) • Artistic CV (PDF format) with education • Repertoire: 2 works in the genre of opera arias	
 A link to your video recordings (YouTube or Dropbox or Goo Eligibility to participate: 	gie Drive or OneDrive)
Please confirm that you either work in the music industry or have ticking the appropriate box: Yes, I work in the music industry of interest in music	
Participants admitted to the audition must pay the participation fe days after receipt of the invoice.	ee of 100 € within 7 working
With my signature I confirm that I have read the regulations of the form and I agree with them.	e application form and consent
Place, Date (DD.MM.YYYY)	Signature