

2025 Ishikawa Music Academy Master Class Application Form

No.

Master Class	<input type="checkbox"/> Violin <input type="checkbox"/> Cello <input type="checkbox"/> Piano
Name	<input type="checkbox"/> Ms. <input type="checkbox"/> Mr.
	<div style="display: flex; justify-content: space-between;"><div>_____</div><div>_____</div><div>_____</div><div>_____</div></div> <div style="display: flex; justify-content: space-between;"><div>Last</div><div>First</div><div>Middle</div><div>In Chinese characters, if any.</div></div>
Date of Birth	Month: _____ Day: _____ Year: _____ (Age: _____)
Country of Birth	Country of Birth: _____ Country of Citizenship: _____ Country of Issuing Passport: _____
Name of Guardian	(Required if applicant is under the age of 13.)
Current Address	<div style="display: flex; justify-content: space-between;"><div>Tel: _____</div><div>Fax: _____</div></div>
Permanent Address (if different from above)	<div style="display: flex; justify-content: space-between;"><div>Tel: _____</div><div>Fax: _____</div></div>
E-mail Address	_____
Address to be sent to	<input type="checkbox"/> Current Address <input type="checkbox"/> Permanent Address
Current or Last School Attended	Name of School: _____ Grade in School: _____ Year of Graduation: _____ Major: _____
Occupation (If you have any)	_____
Current Teacher or Previous Teacher	_____
Music History (Profile)	_____
Major Prizes/Awards Competitions/Scholarship	_____
Pieces to Perform:	
1. _____ (____ mov.) Composer: _____ <input type="checkbox"/> Accompanied <input type="checkbox"/> Unaccompanied	
2. _____ (____ mov.) Composer: _____ <input type="checkbox"/> Accompanied <input type="checkbox"/> Unaccompanied	
3. _____ (____ mov.) Composer: _____ <input type="checkbox"/> Accompanied <input type="checkbox"/> Unaccompanied	

Other considerations please include here