



**CENTRE for OPERA STUDIES in ITALY**  
Darryl Edwards, Artistic Director

**APPLICATION FORM - COLLABORATIVE PIANO**

Name _____ Birth Date _____
Current Mailing Address (valid until June 2010): _____
City _____ Prov/State _____ Postal/Zip Code: _____
Preferred Telephone #: _____ Preferred Email Address: _____
Alternate Contact Info: _____

**CURRENT TEACHER(S):**

\_\_\_\_\_  
\_\_\_\_\_

**COACHES:**

\_\_\_\_\_  
\_\_\_\_\_

**SCHOOLS ATTENDED** (School Degree/Program and Dates):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total Years of Concentrated Study:** \_\_\_\_\_

**CURRENT REPERTORY** (Opera, Company and Date)

\_\_\_\_\_  
\_\_\_\_\_

**LANGUAGES STUDIED AND LENGTH OF STUDY:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Use your CV and Resumé (which includes your educational and performance background) to provide complete information for the above questions.

## PLEASE COMPLETE AUDITION REPERTOIRE FORM

### AUDITION REPERTOIRE:

One movement of a piano sonata by Beethoven, Haydn, or Mozart; one solo work which is representative of middle or late Romantic style; and one opera aria or song, in a collaborative performance with a singer.

### LIST THREE REFEREES:

(ONE of which must be your applied Music Teacher and two from musical authorities who know your work well)

Applied Music Teacher:

1. Name: \_\_\_\_\_ Telephone # \_\_\_\_\_ Email \_\_\_\_\_

Musical Authority:

2. Name: \_\_\_\_\_ Telephone # \_\_\_\_\_ Email \_\_\_\_\_

Musical Authority:

3. Name: \_\_\_\_\_ Telephone # \_\_\_\_\_ Email \_\_\_\_\_

### AUDITION INFORMATION

**LIVE AUDITION** (Circle City/preferred date):

**Toronto** –  Dec: 5 Sat / 6 Sun/ 7 Mon/ **London, On** -  Nov.19 Thurs

**Montreal** –  Nov: 28 Sat/ 29 Sun **Vancouver** –  Nov. 14 Sat

Confirmation of audition date and time will be emailed to applicant when complete application package is received..

Request for a DVD or Video Tape audition. Materials must be received by **Dec. 1<sup>st</sup>, 2009**

### PAYMENT SCHEDULE

Submit with application (this includes the pianist's fee)

All fees are in Canadian Dollars. NON-REFUNDABLE. (Personal cheques/credit cards NOT accepted)

Please Select

\$60 by October 30<sup>nd</sup> 2009  \$75 Oct.31<sup>st</sup> - Nov 14<sup>th</sup> 2009  \$105 Nov. 15 - 23<sup>rd</sup> 2009

***Applicants will be considered for merit scholarships based on the quality of their audition and their completed application package. Requests for Bursaries will be considered according to financial need.***

### ALL APPLICANTS MUST COMPLETE REGISTRATION PROCESSING FORM

### PLEASE READ AND SIGN BELOW TO COMPLETE YOUR APPLICATION

I release the Centre for Opera Studies in Italy – Sulmona, The University of Toronto, The English School and its agents and employees from any and all claims, demands, and causes of action on account of any injury, illness or loss which may occur during my participation in the 2010 **COSI** summer program. All programs, faculty, dates, fees, and offers of financial assistance are subject to change. Non-refundable fees and deposits will be retained upon cancellation.

Signature \_\_\_\_\_

Date: \_\_\_\_\_