



REGISTRATION FORM



January 25-29, 2024

Choir G 1						
Name of the group: in native language (latin l	etters)					
G 2 Country:		G 3 City:				
G 4 Street:		G 5 Zip code:				
G 6 Telephone:		G 7 Mobile phone:				
G 8 Email:						
G 9 Website:						
Contact person			0.44			
ast name:			G 11 Title:	Ms	Mrs	M
G 12 First name:						
G 13 Street:						
G 14 Zip code:	G 15 City:					
G 16 Mobile phone:		G 17 Email:				
Conductor G 18			G 19			
Last name:			Title:	Ms	Mrs	N
-irst name:						
3 21 Street:						
3 22 Zip code:	G 23 City:					
G 24 Mobile phone:		G 25 Email:				





January 25-29, 2024

B nber of singers:	+ Additional	persons:	٦ + [Bus drivers:		otal number:
nber of singers:	(incl. cond	G 30		Bus arivers:	G 31	
	ry 2024	Departure date:	:	January 2024	Total	numbers of nights:
ired accommodation caneed the following numbers						
2						
Economy	Sta	ndard		First		
single person ro	om(s)	single person roc	m(s)	single persor	n room(s)	
2-person room(s	sl	2-person room(s)	l	2-person roo	ım(s)	
2 person room,	5)	2 person room(s)		2 person 100	111(3)	
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REGISTRATION FORM G3

Participation Overview

Name of the group:

We want to participate in the following activities:

Competition

G 46

Evaluation Performance for competing choirs for category:

G 47

Evaluation Performance for non-competing choirs

G 48

Friendship Concert performance in addition to the activities selected above

G 49

Friendship Concert performances only

The following documents are enclosed:

G 50

Three (3) representative recordings (mp3, wav, wma, CD)

G 51

Short biography of the choir in English (editable text document, e.g. Word)

G 52

A recent photo of the choir in landscape format (as jpg file)

G 53

Music scores:

G 54

5 scores of each composition (Competition)

3 scores of each composition (Evaluation Performance)

Registration fee payment

The following payment methods are available for the payment of the registration fee:

Bank transfer to the following account:

Account holder: INTERKULTUR Name of the bank: Deutsche Bank AG Bank address: Marktplatz 4, 35390 Giessen, Germany

Purpose: J24+name of choir

Bank code: 513 700 24 Account number: 0280 420 01 SWIFT-Code (BIC): DEUTDE DB 513

IBAN for EU countries: DE59 5137 0024 0028 0420 01

G 56

Online payment (credit card, PayPal, etc.):







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REGISTRATION FORM Competitive Participation

Thematic Categories (0)

Our choir wants to participate in the following category:

(Requirements for each category are available in the Participant Information.)

A1

Category 0 - Open Repertoire

01 - Open Repertoire - Children's and Youth Choirs

02 - Open Repertoire - Adult Choirs

A2					
We will have the following nu	mber of singers per part:	sopranos	altos	tenors	basses
A3					
Age of the singers from:	to:				

A4 Prog	A4 Program:							
No.	Composer's Last Name	Composer's First Name	Born/Died	Title of the piece	Duration			
1								
2								
3								
4								

A5 Following pieces are with accompaniment - please list the instruments						
1	3					
2	4					

Α	6	

We will BRING the following instruments*:



^{*}a piano or e-piano will be provided by the organizer.



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REGISTRATION FORM Competitive Participation

Thematic Categories (M)

Our choir wants to participate in the following category:

(Requirements for each category are available in the Participant Information.)

A7

Category M - Music of Spirit and Faith

M1 - Music of Spirit & Faith - Children's and Youth Choirs

M2 - Music of Spirit & Faith - Adult Choirs

A8				
We will have the following number of singers per pa	art: sopranos	altos	tenors	basses
A9				
Age of the singers from: to:				

A10 Prog	A10 Program:						
No.	Composer's Last Name	Composer's First Name	Born/Died	Title of the piece	Duration		
1							
2							
3							
4							
5							
6							

A11 Following pieces are with a	ccompaniment - please list the instruments	
1	4	
2	5	
3	6	

A12

We will BRING the following instruments*:



^{*}a piano or e-piano will be provided by the organizer.



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REGISTRATION FORM Non-competitive Participation

Artistic information

Our choir would like to participate in:

Evaluation Activities

No.	Composer's Last Name	Composer's First Name	Born/Died	Title of the piece	Duration
1					
2					
3					
14 ollo	wing pieces are with accom	npaniment - please list the instr	ruments		
	1			3	
	2				

Friendship Concerts

A16	Friendship Concert - Our concert program (max. 15 min.):						
No.	Composer's Last Name	Composer's First Name	Born/Died	Title of the piece	Duration		
1							
2							
3							
4							
5							
6							

A17		
Following pieces are with accompaniment - please list the instruments	1	4
	2	5
	3	6

A18

We will BRING the following instruments*:



^{*}a piano or e-piano will be provided by the organizer.