

INSTRUCTIONS

We recommend that you review our complete guide to the AFAP Summer Music Courses in Europe 2020 online at:

<http://afafestival.com/summer-in-europe/summer-guide/>

Please complete application in its entirety. Type or print clearly.

• Applicants are required to submit a CD recording demonstrating their playing or a written recommendation from their music teacher. Participants of previous AFAP programs are exempt from this requirement.

• All applicants must also submit a completed application form and a non-refundable application fee of \$100 (USD), which will be deducted from the total fee upon acceptance.

• Application fees must be paid by check or money order and made payable to American Fine Arts Festival.

The deadline for receipt of completed applications is:

Germany-Czech Republic-Austria Tour - March 20, 2020

Russia Tour - March 20, 2020

All correspondence, including application forms and fees, should be sent to:

**AFAP Summer in Europe
P.O. Box 106 Holmdel, NJ 07733**

FEES & PAYMENT SCHEDULE

Application Fee: \$100 The application fee is nonrefundable and will be deducted from the total program fee. Applications must be received by:

Germany-Czech Republic-Austria Tour - March 20, 2020

Russia Tour - March 20, 2020

Deposit: \$200. Confirmation and a non-refundable are due by April 1, 2020, with the remaining balance due by April 10, 2020.

Total Program Fees (see web site for details on what is and what is not covered by the program fee):

Hotel Double-Triple Room:

\$3,490 Germany-Czech Republic-Austria

\$3,490 Russia

-Single Room will be available for an additional fee (see rules for details)

Discounts: Participants of previous AFAP Summer Music Courses in Europe programs are eligible for a \$100 discount off the total program fee.

• The AFAP can provide accommodations for those parents or family members who wish to accompany participants for the duration of the program. **The cost of room & board for parents/guardians is \$1,800/\$2,250 per person.** Please call or visit our website for more information.

• Due to extensive pre-arrangements that have to be made in order to ensure the success of this program, late registrations will incur an additional fee of 15% of the cost of the program, and no refunds will be provided for **cancellations made after April 20, 2020.**

• The American Fine Arts Festival assumes **no liability** for medical emergency or other health related expenses. Participants are required to submit proof of travel-medical insurance.

• The American Fine Arts Festival assumes **no liability** for damage, theft or injury which may occur during the course of the program.

For more information, including changes in schedules and fees, additions to the program, and travel tips, please visit us on the web at <http://afafestival.com/summer-in-europe/> or email us afafestival1@gmail.com.

Please tell us how/where you heard about the AFAP Summer Courses in Europe:

AFAP Summer Music Courses in Europe 2020

APPLICATION FORM

I'm applying for:

Russia Tour (March 20, 2020)

Germany-Czech Republic-Austria
(March 20, 2020)

Room Type _____

First Name _____

Last Name _____

Date of Birth (MM/DD/YYYY) _____ Gender F M

Name of Parent or Guardian (if under 18 years of age): _____

Names of Accompanying Parents/Guardians (AFAP can provide accommodations for parents or family members who wish to accompany participants - please check our website for more info)

Street Address _____

City _____

State/Province _____ Zip/Postal Code _____

Country _____ Phone Number _____

E-mail _____ Country of Citizenship _____

Name of Current Teacher _____

Teacher's Phone _____

Teacher's E-mail _____

Instrument(s) _____ Years of Instruction _____

Current Repertoire _____

Desired Course Repertoire _____

I am attaching a check or money order for \$100.00 in U.S. currency made payable to American Fine Arts Festival.

By signing below, I (applicant/parent/guardian) agree to all terms and conditions as described in this application, website, program brochure, and other related materials.

Applicant Signature _____

Parent / Guardian Signature (if under 18 years of age): _____

Date (MM/DD/YYYY) _____