**26th Musical Competition |** 5th International Edition

HOSPITALITY FORM

*please answer using the highlighter button*

The contestant/s require to be hosted by a family? 🖵 YES 🖵 NO

If the answer is positive, the contestants have to fill in the underlying form.

Soloists have to fill in just one section. If they have their own accompanist who requires to be hosted by a family, please fill in the relative section. Chamber groups have to fill in a section for each of their members.

If the answer is negative, the contestants will have to provide personally for their accommodation with no reimbursement by the Società Umanitaria.

Società Umanitaria takes no responsibility on the information given in this form.

|  |  |
| --- | --- |
| Name of the candidate/ Name of the ensemble |  |
|  |  |
|  |  |
| Number of members | 🖵 1 – Soloist🖵 2 – Duo🖵 3 – Trio🖵 4 – Quartet |

**MEMEBER 1**

|  |  |
| --- | --- |
| Name |  |
| Spoken languages |  |
| Allergies or intolerances | 🖵 YES 🖵 NOIf yes, please specify:  |
| Smoker | 🖵 YES 🖵 NO |
| Do you follow any particular diet?[for example vegetarian] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind pets in the house?[dogs, cats, birds...] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind sharing a room with other family members? [for example sons or daughters?] | 🖵 YES 🖵 NO |
| Should you find it necessary to let us know anything else about you that we did not mention, please do so |  |

**MEMEBER 2**

|  |  |
| --- | --- |
| Name |  |
| Spoken languages |  |
| Allergies or intolerances | 🖵 YES 🖵 NOIf yes, please specify:  |
| Smoker | 🖵 YES 🖵 NO |
| Do you follow any particular diet?[for example vegetarian] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind pets in the house?[dogs, cats, birds...] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind sharing a room with other family members? [for example sons or daughters?] | 🖵 YES 🖵 NO |
| Should you find it necessary to let us know anything else about you that we did not mention, please do so |  |

**MEMEBER 3**

|  |  |
| --- | --- |
| Name |  |
| Spoken languages |  |
| Allergies or intolerances | 🖵 YES 🖵 NOIf yes, please specify:  |
| Smoker | 🖵 YES 🖵 NO |
| Do you follow any particular diet?[for example vegetarian] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind pets in the house?[dogs, cats, birds...] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind sharing a room with other family members? [for example sons or daughters?] | 🖵 YES 🖵 NO |
| Should you find it necessary to let us know anything else about you that we did not mention, please do so |  |

**MEMEBER 4**

|  |  |
| --- | --- |
| Name |  |
| Spoken languages |  |
| Allergies or intolerances | 🖵 YES 🖵 NOIf yes, please specify:  |
| Smoker | 🖵 YES 🖵 NO |
| Do you follow any particular diet?[for example vegetarian] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind pets in the house?[dogs, cats, birds...] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind sharing a room with other family members? [for example sons or daughters?] | 🖵 YES 🖵 NO |
| Should you find it necessary to let us know anything else about you that we did not mention, please do so |  |

**PIANO ACCOMPANIST**

|  |  |
| --- | --- |
| Name |  |
| Spoken languages |  |
| Allergies or intolerances | 🖵 YES 🖵 NOIf yes, please specify:  |
| Smoker | 🖵 YES 🖵 NO |
| Do you follow any particular diet?[for example vegetarian] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind pets in the house?[dogs, cats, birds...] | 🖵 YES 🖵 NOIf yes, please specify:  |
| Do you mind sharing a room with other family members? [for example sons or daughters?] | 🖵 YES 🖵 NO |
| Should you find it necessary to let us know anything else about you that we did not mention, please do so |  |