

**Application form**

please fill out completely, scan as pdf and send together with the other application documents as email to [silke.blume@hfm-karlsruhe.de](mailto:silke.blume@hfm-karlsruhe.de)

We hereby register for the competition, the **Wolfgang Meyer Award**, the international competition Karlsruhe for ensembles with clarinet 2024.

**Clarinetist**

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Family name, given name  
.....  
Date of birth  
.....  
Street address  
.....  
Postal code / city  
.....  
Country  
.....  
Mobile number  
.....  
E-mail

**Other ensemble member**

.....  
Instrument  
.....  
Family name, given name  
.....  
Date of birth  
.....  
Street address  
.....  
Postal code / city  
.....  
Country  
.....  
Mobile number  
.....  
E-mail

**Other ensemble member**

.....  
Instrument  
.....  
Family name, given name  
.....  
Date of birth  
.....  
Street address  
.....  
Postal code / city  
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Country  
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Mobile number  
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E-mail

Biographies, photos and passport copies of us and the repertoire list are attached to this application.  
A completed and signed copy of the supplementary sheet "Declaration of Participants" is enclosed for all ensemble members

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Date / Signature clarinetist

**Other ensemble member**

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Instrument  
.....  
Family name, given name  
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Date of birth  
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