

Official Application Form

第1回 Shigeru Kawai 国際ピアノコンクール 出場申込書

The 1st Shigeru Kawai International Piano Competition
(Pre-Selection Rounds for Singapore and Malaysia Region)



Applicant		
Last Name		First Name
Date of Birth (DD/MM/YYYY)	Gender (Sex)	Nationality
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
Present Address		
Mobile Phone	Phone	E-mail
Occupation / Name of School you are currently in		
If Selected, will you be proceeding to the JAPAN Semi-Final round?		
<input type="checkbox"/>	NO, I am only taking part in the Pre-Selection Rounds.	
<input type="checkbox"/>	YES, I have read and understood the info for the JAPAN rounds. If selected, I shall be proceeding.	
Piano Teacher		
Last Name		First Name
Present Address		
Mobile Phone	Phone	E-mail

Repertoire

Please fill in FULL Details: the title, key, opus, movement(s) and playing time correctly.

Preliminary Round (Singapore Competition / Selection)

No	Composer	Title	Time (mins)
1.	F. Chopin	Etude -	
2.			
Total Playing Time :			

Declaration

I, NAME: _____, NRIC: _____, hereby represent and warrant that I have full power and authority to make the representations and warranties contained in this Registration Form. I warrant that the information submitted in this Registration Form is true and correct and I further represent and warrant that I have read and understood the Terms and Conditions as stated above and agree to be bound by them. I understand that failure to comply with the Terms and Conditions above, or any false or inaccurate information provided by me may disqualify me from the Event. I agree to indemnify the organisers from any liabilities, loss, cost and any other expenses, which may result from my participation in the Event.

PDPA Consent

I consent to MS Works Private Limited to collect, use and disclose to their respective group companies, subsidiaries and/or affiliates, my personal data for customer research and marketing purposes during and beyond the term of the Event. Please contact me via email, post, phone.

Signature

Date

Consent Form for competitor under twenty one (21) years of age

I, NAME: _____, NRIC: _____, represent that I am the *mother/father/guardian of the competitor, NAME: _____, NRIC: _____ and am aware of and consent to my *child/ward entering into and agreeing to the Terms and Conditions above and the PDPA Consent and hereby guarantee the fulfilment of the obligations of my *child/ward with respect to the Terms and Conditions above and the PDPA Consent.

Signature

Date

For Official Use

Entry Form verified by: _____ Sign: _____

Date Verified: _____

Competitor Entry Number: _____

FOR JAPAN Semi-final Round

Please fill in the rest of the information below **ONLY** if you are willing to proceed to JAPAN Semi-final round

Music Education background

Year (yyyy/mm)	Name of School/ Institution	Name of Teacher

Prizes/awards won in other competitions

Year (yyyy/mm)	Name of Competition	City/Country	Prize/Ranking

Other musical background (Recital, CD recording, etc.)

Year (yyyy/mm)	Description

Repertoire (JAPAN Semi-final and Final)

Please fill in FULL Details: the title, key, opus, movement(s) and playing time correctly.

Semifinal Round (JAPAN)

No	Composer	Title	Time (mins)
(1)			
(2)			
Total Playing Time :			

Final Round (JAPAN)

No	Composer	Title	Time (mins)
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
Total Playing Time :			