



VLAMO
GEBETEN
DOOR
MUZIEK

Registration form VLAMO Composition Contest 2024

(Please fill in the form on your computer or manually in capital letters.)

Chosen code word or title of the composition: _____

Last name + first name: _____

Date of birth: _____

Street name + number: _____

Postal code + city: _____

Country: _____

Telephone: _____

Fax: _____

E-mail address: _____

VLAMO VZW

Charles de Kerchovelaan 17
9000 Gent
RPR Gent afdeling Gent
0476.917.821

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F 09 265 80 01
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Authenticity statement

I (name + first name): _____

confirm:

- that I understand and accept the rules of the contest;
- that I am the composer of the submitted composition;
- that this composition hasn't been published, nor performed during a public concert or broadcasted on radio or television;
- that this composition never received an award or a mention during another national or international composition contest.

I will accept the decision of the jury.

Date: _____

Signature: _____

(Please complete the registration form with a short resume and a recent photograph.)

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