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| **CONCERT SEASON**  of the Faculty of Arts in Niš for 2022 |
| **Name and surname (contact person):** |
|  |
| **Address:** |
|  |
| **E-mail:** |
|  |
| **Contact phone:** |
|  |
| **Proposed date (month) of the concert:** |
|  |
| **Name, surname and instrument of the performer / Name and composition of the ensemble:** |
|  |
| **Concert program:**  **Full name of the composer**  Precise name of the composition  *Movements*  (Composition duration) |
|  |
|  |
| **Professional biography of the performer / ensemble :** |
|  |

*By submitting this form, you automatically agree to the Competition terms and conditions.*