



Application form to SOLOISTS

Full name: _____

Artistic name: _____

Address: _____

City/Town: _____ Country: _____

Email: _____ Mobile: _____

Birthday: ____/____/____

This form should be sent to: nunofigueira65@gmail.com

As soon as possible, please send:

- Copy of Identity Card, Citizen Card or Passport
- Biography (short)
- Photo
- Title of the songs and name of authors/composers (lyrics and music)
- Playbacks (half and full) of songs (in mp3)
- Lyrics
- Information about accompanying persons (names, copy of the Identity Card, Citizen Card or Passport, kinship or function, etc.)
- Flight details (if applicable)

Payments should be made by bank transfer to the following account:

Owner of the Account: Alberto Trindade Martinho

Name of the Bank: Crédito Agrícola

IBAN: PT50004540804022534035215

BIC/SWIFT: CCCMPTPL

