

Daniel Ferro

VOCAL PROGRAM

THE DANIEL FERRO VOCAL PROGRAM, INC.

Greve in Chianti, Italy
July 7 – July 18, 2025

641 Lexington Avenue, Floor 15
New York, NY 10022
Tel: 212-605-0594

Email: ferrovoce@aol.com or danielferrovocalprogram@gmail.com

Please complete this application form in full and return it with your resume, repertoire list, photograph, letter of recommendation, and audition performance materials (See Information Package for audition details). Your non-refundable application fee of \$50.00 should be made payable to "**The Daniel Ferro Vocal Program, Inc.**" in US dollars (US\$) by check, bank transfer, or via PayPal.

I am applying for status as (check one):

☐ Active Advanced Participant ☐ Active Intermediate Participant ☐ Auditor

Participation Dates:

Arrival Date: July / _____ / 2025 Departure Date: July / _____ / 2025

PERSONAL INFORMATION:

Your Legal Name in Full:

(Last)

(First)

(Middle)

Current Mailing Address:

(Number and Street)

(Apt. No.)

(City)

(State)

(Zip Code)

(Country)

Valid Until: (Month/Day/Year) _____ / _____ / _____

Phone: _____

(Evening Phone)

(Daytime/Cell Phone)

Permanent Mailing Address:

(Number and Street)

(Apt. No.)

(City)

(State)

(Zip Code)

(Country)

Alt Phone Number: _____

E-mail Address: _____

Date of Birth: (Month/Day/Year) _____ / _____ / _____

Social Security Number: _____

Citizenship: _____

Primary Language _____

Visa Type _____

Gender: ☐ Male ☐ Female

ACADEMIC HISTORY:

Secondary School: _____
(Name/Location) (Year of Graduation)

Post-Secondary Colleges or Universities:

(Name) (Year of Graduation) (Degrees)

(Name) (Year of Graduation) (Degrees)

Have you ever lived outside your own country? ☐ Yes ☐ No

If yes, please indicate where and for how long:

YOUR MUSICAL BACKGROUND:

1. (All *Active* Participants): What is your voice type? _____

Years of private study _____

2. Who have been your principal teachers? Please list name, address, phone and dates of study.

3. Have you ever participated in a summer program before? If so, please indicate which program(s) and when (dates).

4. Teachers, Coaches, Conductors & Location(s) of professional activity. Please indicate institution and/or private studio.

5. Performing experience summary (In addition, please attach your résumé and photo):

6. Please write briefly about your motivation for participating in this program.

AUDITION INFORMATION (All *Active* Participants):

Please list the selections you will present as your audition. At least 3 compositions should be offered.

PLEASE NOTE:

We are no longer holding live auditions. All audition material should be submitted electronically through one of the following ways:

- A Link to a YouTube video
- A Link to a video page on your personal website
- As .mp4 email attachments

All materials should be submitted to ferrovoce@aol.com or danielferrovocalprogram@gmail.com

REPERTOIRE INFORMATION:

The repertoire I propose to work on this summer would include:

The repertoire I am prepared to perform in public concerts includes:

HOW DID YOU HEAR ABOUT THE PROGRAM?

☐ Advertisement Publication: _____

☐ Personal recommendation by: _____

☐ Other: _____