

The 19th Fukushima Vocal Ensemble Competition 2026
PRELIMINARY SCREENING APPLICATION FORM

Fill in the form using block letters and put ✓ mark in the chosen boxes.

Choir

Choir Name in English

Choir Name in Chinese or Korean (if any)

Address

Country

E-mail

Phone

Fax

Country code / Area code / Number

Country code / Area code / Number

Website

Contact Person

☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr. ☐ Prof.

Name in English

First Name

Last Name

Name in Chinese or Korean (if any)

First Name

Last Name

Address

Country

E-mail

Phone

Fax

Country code / Area code / Number

Country code / Area code / Number

Participating In

☐ Category I (ages 12–15) ☐ Category II (ages 15–18) ☐ Category III (ages 6–12 / up to 18) ☐ Category IV (others)

List of Choral Pieces – Recording (Max.9min.)

No.	Title	Composer	Duration
	Example	W.A. Mozart	3:00
1.			
2.			
3.			

Number of Singers in the Recording

	Male		Female		Total (2–16 singers)
	<input type="text"/>		<input type="text"/>	+	<input type="text"/>

Date of Recording

Date	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Profile of the Choir

Year of Establishment

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Main Annual Activities and Highlights

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Award History

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Questionnaire – How did you hear about the competition?

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List of Documents

Put ✓ mark in the column if the document has been enclosed and fill in the number of copies of the document.

✓	Document	Number of Copies
	Application Form (with signature)	
	A Separate CD Sound Recording (2–16 singers scheduled to perform/ recorded after Apr. 2025 / Max 9 min.)	
	Digital Photo of the Choir	

All the documents should be submitted no later than 30 September 2025 to:

The Executive Committee of the Fukushima Vocal Ensemble Competition

(Cultural Promotion Division of the Fukushima Prefectural Government)

2-16 Sugitsuma-cho, Fukushima City, Fukushima 960-8670 Japan

E-mail v-ensemble@pref.fukushima.lg.jp

Agreement

We hereby declare that the information given in this form is correct. We also understand and agree to the competition rules and conditions of participation.

Date

Month

Year

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Signature

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Name

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Position

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