Saturday Morning Recital Sign-Up Form

This form must be completed and submitted to the Music Office by 12:00 PM on the Friday eight days prior to the recital date.

PLEASE PRINT OR TYPE

RECITAL DATE AND LOCATION

Saturday, _______ 20 _______ Björling Recital Hall 11:00 AM

Day Month Date Year Location Time

PERFORMANCE INFORMATION  (Required)

Please be sure that all information listed in this category is correct and accurate (spellings, accent marks, dates, etc.).

Title: __________________________________________ Year of Composition: ______

Movements: __________________________________ Performance Time: ______

WHERE APPLICABLE

Composer: __________________________ Year of Birth: _____ Year of Death: _____

Performer: __________________________ Instrument/Voice:_____________________

If a chamber ensemble is performing, please attach a separate piece of paper with information regarding performers and instruments.

ACCOMPANIST / ASSISTANT INFORMATION  (Optional)

Accompanist: __________________________ Accompanying Instrument: __________

If piano accompaniment is needed, please indicate which Björling Recital Hall piano you and your accompanist would prefer to use:

☐ 7-FT STEINWAY
☐ 9-FT STEINWAY
☐ EITHER

INSTRUCTOR APPROVAL (Required)

Instructor: __________________________ Office Ext.: ____ E-Mail Address: ______@gac.edu

Signature

CONTACT INFORMATION (Required)

Your Name: _________________________ Campus Ext.: ____ E-Mail Address: ______@gac.edu

Please submit completed forms to the Music Office for processing.