2015-2016 Undergraduate Degree Recital Request Form

Name ____________________________________________  Today’s Date ________________________________

Address ________________________________________  Instrument/Voice ____________________________

________________________________________________  Performance Date ____________________________

Email ____________________________________________  Performance Time ____________________________

Phone Number ____________________________________  Performance Venue __________________________

KUID ____________________________________________

Recital Classification: □ Junior  □ Senior

Recital Series  Fee  Amount Due
Student Recital Series  Murphy Hall Rooms ($80)
Hall Rental, Marketing (website, School of Music events list, KU events list), Piano Tuning, Programs, Student Monitor, AUDIO Recording

Student Recital Series  Outside Murphy Hall (incl. Bales) /Off Campus ($40)
Marketing (website, School of Music events list, KU events list), Programs
(recording ONLY included for Bales Recital Hall - see policy for more information regarding recording)

Contact Brock Babcock (brockbabcock@ku.edu) for A/V needs.

A non-refundable deposit of at least $40 is required when the recital is scheduled.
Date changes will require an additional non-refundable $40 deposit.

With my signature, I do hereby agree that I have read and understand the terms and conditions outlined in the Recital Scheduling Policy packet. I agree that I will abide by these policies and procedures including the following:

_____ Failure to submit the recital program at least two weeks before the performance date and as prescribed in the Recital Scheduling Policy will result in the automatic cancellation of the recital.

_____ Failure to pay the full recital fee at least two weeks before the performance date will result in the cancellation of the recital.

_____ Rescheduling the recital will cost an additional $40.

_____ This recital is in partial fulfillment of the requirements for my degree.

_____ Dress rehearsal time in Swarthout Recital Hall must be scheduled through the applied professor who will be granted access to the hall and must be present during the rehearsal.

Performer Signature ________________________________________________

Applied Professor Signature __________________________________________

To be complete by office staff:

Event Date/Time ____________________________  Deposit Amount ____________________________

Event Location ____________________________  Amount Due ____________________________
Recital Equipment Needs:

_______ Chairs (number needed)

_______ Stands (number needed)

Also need:

☐ Podium  ☐ 2 pianos

If you require a specific arrangement on stage, please use the above diagram to sketch the set up you would like to use.