MICHIGAN STATE UNIVERSITY | COLLEGE OF MUSIC Student Recital

Student Recital Scheduling Contract

Name			Instrument/Voice Type:		
MSU Phone #			MSU E-mail		
Address					
Type of Recital:	Doctoral:	☐ 1st solo ☐ 2nd solo		ure 🔲 3rd :	solo 🗌 Optional
_	Masters:	Required N	Non-Required		
Unde	rgraduate:	Required Senior	Other		
Keyboard(s) Needed:	☐ Piano	2 Pianos H	arpsichord 🔲 Organ	Other	
DO YOU WANT THIS	EVENT REC	ORDED BY MSU RECORDING	SERVICES? Yes	☐ No	
By checking this box contact recserv@ms	•	al will be recorded by MSU	recording services. You are re	esponsible for a	all fees. For questions
If you need sound re	einforceme	ent contact Recording Servi	ces directly (this service is on	y available in C	Cook Recital Hall).
Performance Room F	Request:	Cook Recital Hall	Hart Recital Hall Ot	her (describe be	elow)
		Please give specific address o	and contact phone number if off c	ampus	
On what day/date do book for Priority I.	you want	to schedule your recital? Yo	u do not need to list a Priority	II if you have a	hold in the schedule
		Priority I		Priority II	
Da	y of Week		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	Date				
	Time				
l hav	e received	a copy of the College of Mus	ic Recital Policy and will comp	ly with its requ	irements.
Student Signature		Date	Faculty Signature		Date
		orming your recital at an outre ation for Outreach Activity.	each venue, please go to music.r	nsu.edu/outreac	:h and
	Confirma	tion will be e-mailed to you re	garding the date and time your	recital is schedu	led.
				-	FOR OFFICE USE ONLYBook Wel Spreadsheet PR