Concert/Recital Information

To be submitted to Amanda Berg (amanda.berg@uleth.ca)

Contact Information

Student name:	Phone:	
Email:		
	Time:	
Concert/Recital Information		
Performance location: Recital Hall		
Names and instrumentation of all per have approved campus access – <u>brad</u>	rformers including collaborative pianists (contact t ley.parker3@uleth.ca)	the Studio Coordinator if any performers do not
Arrival time of artist(s):	(Performers must arrive backstage .	30 minutes prior to performance)
Piano requested: Robert (old Steinwa	ay) Clara (new Steinway)	
Piano music rack removed: Yes _	No Are piano moves requir	ed: Yes No
Page turner: Yes No		
Required Equipment		
Number of music stands:	Number and style of chairs:	
Risers: Yes No	Podium/Lectern: Yes No	Microphone: Yes No
Harpsichord: Yes No	Percussion Equipment: Yes No	Two Pianos Yes No
If 'yes' to any of above, please give	details:	
<u>Miscellaneous</u>		
Is audio play back required as a part of	of the concert: Yes No	
Provide detail:		
Any other special requests:		