

Facility Reservation Form Degree Recitals

THIS FORM IS DUE 15-DAYS AFTER RECEIPT
Incomplete forms will not be accepted.

STUDENT NAME: _____ ID# _____

EMAIL: _____ PHONE #: _____

Check Appropriate Boxes Below:

Undergraduate Graduate

Composition Conducting Jazz Performance Music Education Performance

INSTRUMENT/VOICE: _____ STUDIO PROFESSOR: _____

Recital Details

DAY OF THE WEEK	DATE	START TIME	CH – M126 Concert Hall	WRH – M183 Wahlberg Recital Hall	OTHER Please state

\$125 Recital Reservation Required

Check Box for Appropriate Hall

	Day	Date	Time	Location
Hearing:				
Dress Rehearsal:				

RECEPTION: \$50	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<i>Assistant required for all receptions in building. Completion of University Food Service Form required. No Exceptions (see reverse)</i>
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Student's Signature

Date

Faculty Approval for Event - REQUIRED -

Faculty Name (Print)

Faculty Signature

Date

*All signees acknowledge and will comply with all policies and regulations established by California State University, Fresno.
<http://www.csufresno.edu/hr/policies/MAPP/III/D/D-08.pdf>*

You will receive a separate Technical Specification Form

<i>- For Office Use Only -</i>		
<input type="checkbox"/>	<i>Zimbra Check</i>	<input type="checkbox"/>
<input type="checkbox"/>	<i>Food Waiver</i>	<input type="checkbox"/>
	<i>R25 - Entry</i>	<i>Copy To Tech</i>