Department of Music

School of Arts and Humanities

CONFIRMATION:				
Day:				
Date:				
Time:	to			
Event Begins:				
Room(s	s):			

Facility Requisition Form

This form should be submitted at least 30 days prior to event.

	REQUEST	ED INFORMATION	
		(please circle day)	
	Day: <u>S</u>	M T W TH F S	
	Date:		
	8		
Title of Event:	SENIOR	GRADUATE	
Instrument:			
Name of Organization/In	ndividual:		
Responsible Party:		Daytime Tel. #	
Mailing Address:			
City		State Zip	
Facility requested: (check	k all that apply)		
Concert Hall		Wahlberg Recital Hall	
Rehearsal Hall		Small Ensemble Room	
Recording Studio		MIDI Lab	
Dept. Computer Lab		Practice Room (how many?)	
Conference Room		Classroom (how many?)	
Foyer/Dean's Gallery	NC	Dressing Room (how many?)	
Type of event: (check all	that apply)		
Solo Recital		Chamber Recital	
Large Performing Group (Concert	Rehearsal	
Hearing		Other	
Faculty signature require	ed:		
		sponsible for arranging the particulars of this event.	.)
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Accompanist Signature	(If applicable)		

On the back of this form, check off any additional services and equipment you will require. These additional services are not included with the facility rental fees, and are subject to the fee schedule outlined on the back of the form.

> The availability of these additional services and equipment cannot be guaranteed unless requested at least 14 days in advance.