

## MUSIC SEMINAR INFORMATION FORM

Please supply the required information to reserve a place in the Thursday morning seminar. Bring this form to Dr. Guthrie's office at least 7 days before your performance. All information must be filled out clearly, completely, and accurately; otherwise the form will be returned. Please print neatly and check all spellings. You must have the signature of your applied teacher in order to participate in seminar.

1. Your Name: \_\_\_\_\_

2. Today's Date: \_\_\_\_\_

3. Date requested: \_\_\_\_\_

4. Title of Piece: \_\_\_\_\_

5. Name of Movements: 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

6. Exact Time of Piece: Min: \_\_\_\_\_ Sec. \_\_\_\_\_

7. Full Name and Dates of Composer: \_\_\_\_\_  
Name Dates

8. Instrument/Voice of Soloist: \_\_\_\_\_

9. Pianist (if applicable): \_\_\_\_\_

10. Signature of Faculty Sponsor: \_\_\_\_\_

11.	PERFORMERS	INSTR/VOICE	PERFORMERS	INSTR/VOICE
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1.	_____	_____	5.	_____
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2.	_____	_____	6.	_____
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3.	_____	_____	7.	_____
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4.	_____	_____	8.	_____
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12. Please describe the stage setup that you would like for your performance (examples, one page-turner's chair, two stands, etc.) Please define the piano, if you are using the piano, with one of the following:

Full lid up

½ lid up

piano lid closed

Special Stage Requests: