

Seminar Performance Request Form

Today's Date		Today's Time	
Total Performance Min. (8 max)			
Seminar Date:			

Student Name:			
Major:			
Performance Medium: voice, clarinet, acting, etc.			
Instructor Signature:			
Pianist Signature:			
Other Performers (list "Assisted By")			
Special Needs Equipment, Stands,			

Vocal Performance

Selection Title #1		Time	
Composer			
Selection Title #2		Time	
Composer			
Selection Title #3		Time	
Composer			

Theatre Performance

Play Title #1			
Playwrite			
Scene(s)		Time	
		Time	
Play Title #2			
Playwrite			
Scene(s)		Time	
		Time	
Play Title #3			
Playwrite			
Scene(s)		Time	
		Time	

Instrumental Performance

Composition Title		TOTAL	
Composer			
Movement(s)		Time	
		Time	
		Time	