

2011-2012 RECITAL PACKET for Student Degree Recitals

TODAY'S DATE: _____

NOTE:

- This form must be submitted to the Concert Office **THREE WEEKS** before the recital or dress rehearsal.
- See the 2011–2012 Student Recital Handbook for more details pertaining to your recital.
- **Program/Staging Form must be signed by your teacher.**
- For pieces involving more than 10 performers, complete and return a Large Ensemble Request form to the Concert Office **FIVE WEEKS** before performance. All requests are subject to approval by the Concert Office.
- Both Steinways may reside on stage during any student recital in Kilbourn Hall.
- Use of school percussion equipment must be requested and arranged directly with Professor Michael Burritt.
- Use of harpsichord or Positiv Organ requires submission of a signed Instrument Request Form to the Instrument Office (ESM 505) **THREE WEEKS** before the performance.

PROGRAM/STAGING INFORMATION

| <i>STUDENT INFORMATION</i> | <i>DEGREE INFORMATION</i> |
|---|---|
| Student Name: _____ Phone Number: _____ Email: _____ Performance Date: _____ Time: _____ Rehearsal Date: _____ Time: _____ Venue: <input type="checkbox"/> KH <input type="checkbox"/> HHH <input type="checkbox"/> Ciminelli <input type="checkbox"/> Hatch Hall <input type="checkbox"/> 120 <input type="checkbox"/> Other _____ | Instrument/Voice: _____ Teacher: _____ Degree: <input type="checkbox"/> DMA <input type="checkbox"/> MM <input type="checkbox"/> BM PC Recital: <input type="checkbox"/> Yes <input type="checkbox"/> No <hr/> Studio Teacher Signature (<i>required</i>) |
| <p><i>FOR KILBOURN HALL RECITALS ONLY</i> <i>Please select resources from the list below only if your performance is in Kilbourn Hall.</i></p> <input type="checkbox"/> Steinway #941 <input type="checkbox"/> Steinway #660 <input type="checkbox"/> Harpsichord <input type="checkbox"/> Positiv Organ <input type="checkbox"/> Chairs (# of chairs ____) <input type="checkbox"/> Stands (# of stands ____) <input type="checkbox"/> Podium <input type="checkbox"/> Lectern <input type="checkbox"/> ESM Percussion equipment Percussion Contact: _____ <input type="checkbox"/> ESM Computer Music services _____ <input type="checkbox"/> Other (please specify) _____ | <p style="text-align: center;"><i>PROGRAM INFORMATION</i></p> Please indicate number of programs you want to order: <ul style="list-style-type: none"> <input type="checkbox"/> 50 (\$7.00) <input type="checkbox"/> 100 (\$9.00) <input type="checkbox"/> will produce own program <input type="checkbox"/> will produce own texts/translations Additional performers, if any (list and circle): _____ Accompanist/Soloist _____ Accompanist/Soloist Total numbers of persons involved: _____ Total Performance Time: _____ <p><i>PLEASE NOTE:</i> Senior recitals are not to exceed <u>50 minutes</u> of music, including encore. PC, DMA, and MM recitals are not to exceed <u>65 minutes</u> of music, including encore.</p> |
| <p style="text-align: center;"><i>SOUND REINFORCEMENT</i></p> Contact the Technology and Music Production department directly (ESM Room 60) for all audio-visual requests. | |


2011-2012 RECITAL PACKET for Student Degree Recitals


STAGING INFORMATION


NAME: _____ **PERFORMANCE DATE & TIME:** _____


Use one box for each piece on your program. You may copy this form and use additional sheets if your performance exceeds 5 stage changes.


Please use the following symbols to help illustrate your set-ups:

PIANO 

 CHAIR 

 STAND 

 HARPSICHORD 

 BASS STOOL 

1st Selection/Set _____
 Timing of Piece: _____
 Number of Performers: _____
 Number of Stands: _____
 Number of Chairs: _____
 Page Turner Chair: yes no
 Piano Lid Position: Full ½ Stick Closed
Other: _____

2nd Selection/Set _____
 Timing of Piece: _____
 Number of Performers: _____
 Number of Stands: _____
 Number of Chairs: _____
 Page Turner Chair: yes no
 Piano Lid Position: Full ½ Stick Closed
Other: _____

3rd Selection/Set _____
 Timing of Piece: _____
 Number of Performers: _____
 Number of Stands: _____
 Number of Chairs: _____
 Page Turner Chair: yes no
 Piano Lid Position: Full ½ Stick Closed
Other: _____

4th Selection/Set _____
 Timing of Piece: _____
 Number of Performers: _____
 Number of Stands: _____
 Number of Chairs: _____
 Page Turner Chair: yes no
 Piano Lid Position: Full ½ Stick Closed
Other: _____

5th Selection/Set _____
 Timing of Piece: _____
 Number of Performers: _____
 Number of Stands: _____
 Number of Chairs: _____
 Page Turner Chair: yes no
 Piano Lid Position: Full ½ Stick Closed
Other: _____

*Please indicate position of sound reinforcement, electronics, or percussion.
 ** Please indicate intermission.

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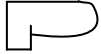
STAGING INFORMATION

NAME: _____ **PERFORMANCE DATE & TIME:** _____

Use one box for each piece on your program. You may copy this form and use additional sheets if your performance exceeds 5 stage changes.

Please use the following symbols to help illustrate your set-ups:

PIANO



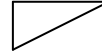
CHAIR



STAND



HARPSICHORD



BASS STOOL



6th Selection _____

Timing of Piece: _____

Number of Performers: _____

Number of Stands: _____

Number of Chairs: _____

Page Turner Chair: yes no

Piano Lid Position: Full ½ Stick Closed

Other: _____

7th Selection _____

Timing of Piece: _____

Number of Performers: _____

Number of Stands: _____

Number of Chairs: _____

Page Turner Chair: yes no

Piano Lid Position: Full ½ Stick Closed

Other: _____

8th Selection _____

Timing of Piece: _____

Number of Performers: _____

Number of Stands: _____

Number of Chairs: _____

Page Turner Chair: yes no

Piano Lid Position: Full ½ Stick Closed

Other: _____

9th Selection _____

Timing of Piece: _____

Number of Performers: _____

Number of Stands: _____

Number of Chairs: _____

Page Turner Chair: yes no

Piano Lid Position: Full ½ Stick Closed

Other: _____

10th Selection _____

Timing of Piece: _____

Number of Performers: _____

Number of Stands: _____

Number of Chairs: _____

Page Turner Chair: yes no

Piano Lid Position: Full ½ Stick Closed

Other: _____

*Please indicate position of sound reinforcement, electronics, or percussion.

**Please indicate intermission.

2011-2012 RECITAL PACKET for Student Degree Recitals

PROGRAM INFORMATION

NAME: _____ PERFORMANCE DATE AND TIME: _____

NOTE:

- All information below is required by the Concert Office for all student recitals. This information is used for:
 - Creating recital programs
 - House Manager planning of ushering staff for performance
 - Usher reference in assisting with staging during the performance
 - Technology and Media Production recording
 - Sibley Library Archives
- You may copy this form and use additional sheets if your performance exceeds 5 stage changes.

1st Selection

Composition Title: _____ Composer: _____
(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

2nd Selection

Composition Title: _____ Composer: _____
(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

3rd Selection

Composition Title: _____ Composer: _____

(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

4th Selection

Composition Title: _____ Composer: _____

(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

5th Selection

Composition Title: _____ Composer: _____

(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

6th Selection

Composition Title: _____ Composer: _____

(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

7th Selection

Composition Title: _____ Composer: _____

(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

8th Selection

Composition Title: _____ Composer: _____

(first and last name)

Key: _____ Opus # or Date of Composition _____ Birth/Death Dates: _____

Thematic Catalog Number (K., BWV, etc): _____ Estimated Performance Timing _____

If this selection is extracted from a larger work, title of that work: _____

Is this an arrangement or transcription? _____ If yes, KEY of original: _____

Original title/Instrumentation of the work: _____

Tempo markings/names of movements: _____

Other performers: _____

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DEADLINE REMINDERS

| <i>When</i> | <i>What</i> | <i>Where</i> |
|-----------------------|--|--|
| 4 weeks before | Request special audio/visual needs Submit Student Broadcast Clearance form | Technology & Media Production (ESM 60) |
| 3 weeks before | Submit Recital Packet (Program Staging Form, Recital/Concert Program Worksheet, Stage Diagrams for Kilbourn Hall /Hatch Recital Hall) | Concert Office |
| 3 weeks before | Submit Instrument Request Form | Concert Office |
| 1 week before | Submit Student Degree Recital Video Order Form Pay for Program (if program is being done by the Concert Office) | Cashier's Window |
| 1 week before | Proof Program (if program is being done by the Concert Office) OR Submit 10 copies of self produced programs | Concert Office |

TECHNOLOGY AND MEDIA PRODUCTION

Sound reinforcement will be provided at the discretion of the T&MP department. Please note: sound reinforcement may not be available for a dress rehearsal scheduled on a day other than the date of your recital, and, even if available, will be subject to an additional fee from T&MP. Please call Music Technology & Media Production Department (ESM 60) at (585) 274-1130 if your recital requires sound reinforcement.

PROGRAM PAYMENT INFORMATION

Please detach this portion of the page and take it to the cashier window with your payment.

NAME: _____

RECITAL DATE/TIME: _____

PROGRAMS ORDERED: 50/\$7.00 100/\$9.00

*Note: You must pay for your program in order to be able to proof it and have it printed. Payments are made at the Cashier's Window on Monday –Friday from 9:00am - 12:00pm and 12:30pm - 3:00pm. The cashier will give you a yellow receipt after you pay. **You must bring the yellow receipt to the Concert Office as proof of your payment when you come to proof your program.***