STAGING FORM for FACULTY ARTIST RECITAL

TODAY'S DATE:

NOTE:

- This form must be submitted to the Concert Office THREE WEEKS before the recital or dress rehearsal.
- Use of harpsichord, fortepiano 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				
ARTIST INFORMATION	PERFORMANCE INFORMATION			
Name of Performer or Group:	Performance Date: Time:			
Contact Person: Phone: Email: Names of Soloists, Guests, and Conductor:	Rehearsal Date: Time: Venue:			
RESOURCES Steinway #941 Steinway #660 Steinway #798 (Hatch Recital Hall) No Piano Harpsichord Positiv Organ Chairs (# of chairs) Stands (# of stands) *Choral Risers (# of risers) *Jazz Risers Podium Lectern *ESM Percussion equipment (Percussion Contact:) Other (please specify):	AUDIO/VISUAL INFORMATION Sound Reinforcement Microphone (instrument) quantity: Microphone (speaking) Lectern or mic stand? Please provide a detailed Audio/Visual request:			
*availability cannot be guaranteed	Will there be CD Sales? ☐ yes ☐ no If so, how much is each CD? \$ Rev. November 20, 2017			

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STAGING INFORMATION

NAME	DEDECON	MANICE DATE O TIME		
NAME:	PERFORM	IANCE 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 PIANO CHAIR	o illustrate your set-ups STAND	HARPSICHORD	BASS STOOL ©	
1st Selection/Set				
2 nd Selection/Set				
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:				
5 th Selection/Set				