

LAMAR UNIVERSITY
Mary Morgan Moore Department of Music
Recital Request Contract

This form must be filled out electronically and submitted to the MMM Music Office

To be completed by recitalist

<hr/> Recitalist	<hr/> Instrument/Vocal Category/Ensemble
<hr/> E-mail Address	<hr/> Phone
<hr/> Primary Instructor	
<hr/> Degree	<hr/> Accompanist
Recital Date: <hr/> mm/dd/yyyy	
Recital Time: <input type="checkbox"/> 5:30 p.m. <input type="checkbox"/> 7:30 p.m.	Recital Duration: <input type="checkbox"/> Half (30 minutes) <input type="checkbox"/> Full (60 minutes)
Dress Rehearsal: <hr/> mm/dd/yyyy <hr/> Time (2-hour block)	
<input type="checkbox"/> Request for Recording <i>(additional form required—fees apply)</i>	
<input type="checkbox"/> I have read and agree to the Departmental Recital Requirements	
Four (4) weeks prior to recital, I will:	
<input type="checkbox"/> Complete/submit the Phi Mu Alpha Concert Management	
<input type="checkbox"/> Complete/submit the Delta Omicron Program Assistance form	
<hr/> Recitalist Signature	<hr/> Date (mm/dd/yyyy)

SIGNATURES

<hr/> Primary Instructor	<hr/> Date
<hr/> Accompanist	<hr/> Date
<hr/> Department Chair	<hr/> Date
<input type="checkbox"/> Approved	
<input type="checkbox"/> Not Approved	

*All signatures are **required before** the recital date/time can be reserved.*