RECITAL REQUEST FORM

Student Name:	Instructor:					
Student No.	Co	ourse No. 747B	745B	647B		
Recital Date:	DD MM YY TIME 645B 7310 7210					
		445B	345B	440B		
Venue:	Suncor Energy Hall Cook R	ecital Hall				
REPERTOIRE						
Title	Co	omposer	Duration (minutes)	Accompanying Musician(s)		
TOTAL DURATION: minutes						

Notes:

Option 1 - Archival Video - \$100.00 plus HST

Option 2 - Livestream - \$100.00 plus HST

Option 3 - Archival Video & Livestream - \$150.00 plus HST

Option 4 - Public Video Recording - No fee. I understand the protocol I must follow when recording my recital.

	APPROVAL		
Student Signature:		Date:	
Instructor Signature:		Date:	