PERFORMERS SHOWCASE AGREEMENT FORM

This form may be handed in to the Precollege Office two or three Saturdays (excluding holiday Saturdays) prior to the concert requested. Please print clearly. Incomplete, illegible or inaccurate forms will not be processed. Your time will be posted the Saturday before the performance.

INDIVIDUAL PERFORMANCES

Name: __________________________________________________ Phone Number: ___________________________________
Instrument: ______________________________________________ Teacher: _________________________________________
Please list your large ensemble (orchestra, chamber, etc.) and time it meets: _________________________________________________

CHAMBER GROUP PERFORMANCES

Chamber Coach: ________________________________ Chamber Class Time: ________________________________
Chamber Coach Signature (REQUIRED): ________________________________
Chamber Coach Phone Number: ________________________________
Chamber Coach Email Address: _______________________________________________________________________________
Student’s Names and Instruments
___________________________________ ________________________________ ___________________________________
___________________________________ ________________________________ ___________________________________

PERFORMANCE INFORMATION

Title of Piece (include opus #, key, etc.) ____________________________________________________________________________
Movement (include number, tempo markings, etc.): ___________________________________________________________________
Composer: ________________________________________________________ Composer’s Dates: _________________________
Accompanist (indicate NA if not applicable): __________________________________________________________________________
The piece that I am performing is _______ minutes long. (Please be exact)
Depending on the performance date of your choice, please list the time(s) you are available to perform:
I am available to perform during the following times. (min. 30 minute range): ________________________________

(SEE REVERSE)
My primary teacher agrees that I am prepared to perform in the Performers Showcase selected below:

(Please check one) Note: All Performers Showcase Performances are scheduled in Greenfield Hall.

- October 1, 2011 between 9:00 a.m. – 2:00 p.m.
- October 22, 2011 between 1:00 p.m. – 6:00 p.m.
- November 12, 2011 between 9:00 a.m. – 2:00 p.m.
- December 3, 2011 between 9:00 a.m. – 2:00 p.m.
- December 17, 2011 between 3:00 p.m. – 6:00 p.m.
- January 28, 2012 between 1:00 p.m. – 6:00 p.m.
- February 11, 2012 between 9:00 a.m. – 2:00 p.m.
- February 25, 2012 between 1:00 p.m. – 6:00 p.m.
- March 10, 2012 between 9:00 a.m. – 2:00 p.m.
- March 31, 2012 between 9:00 a.m. – 1:00 p.m.
- April 21, 2012 between 1:00 p.m. – 6:00 p.m.

PLEASE READ THE FOLLOWING AGREEMENT CAREFULLY

Students will only be allowed to perform in the order that is on the printed concert program. The program will be posted the Saturday before the concert. Students are responsible for looking up their own time, initialing by their name on the posted program, and informing their teacher and accompanist of their scheduled time. Students who do not confirm their posted times are subject to cancellation.

Please dress nicely for these performances – no sneakers, tee shirts, jeans or sweatpants permitted. (Concert dress only)

I understand that I will be scheduled according to my availability as provided on this form and the availability of performance time available. If necessary, I may be excused from class (except large and small ensembles) with my teacher's approval in order to make my appointed performance time. Students are NOT excused from their large or small performance ensemble classes (orchestra, chamber, etc.) in order to participate in the Performers Showcase. In the case of a conflict with a scheduled class, I will be responsible for informing the teacher prior to my performance and making up all missed class work. If I miss my appointed time, I forfeit my chance to play at this concert.

I have read and understand the commitment required to perform in the Performers Showcase.

PLEASE, NO PARENTS PERMITTED IN THE BACK STAGE AREA

__________________________________     _________________________________          _____________________________
Student’s Signature                         Parent’s Signature               Primary Teacher’s Signature