

Recording and Distance Learning Department
Myers Recording Studio

PRIORITY COPY REQUEST FORM
2009-2010
(Faculty and Staff Use Only)

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Today's date _____

Name _____ Department _____

Number of copies requested _____ Extension _____

(*Limit of 3 per order***)**

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Copy type: CD (CDR) DVD (*By special request only)

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- Public/Donor Relations Comp to visiting/guest artist Artist-in-residence
 Grant Proposal Orchestral/opera reference/study Library reserve/instructor
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Copies requested of the following performances, pieces and/or events:

(please include name, date, time, and venue of event or performance. Also include details for specific piece)

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