FREDONIA SCHOOL OF MUSIC EVENT SCHEDULING REQUEST (ESR)

(This form is to be used only for concerts, master classes, lectures, etc. that are open to the public)

Today's Date

Event Date	Event Start Time		Event End Time
Performing Group/Event Title [] Curricular ensemble [] MUS 120 event	[] SA organization [] Other:		npus department 501(c)3 status: yes/no
Venue: [] Rosch Recital Hall	[] Diers Recital Hall	[] Other	
Rehearsal(s):			
Date	Start Time	End Time	
Date	Start Time	End Time	
Please check one: [] Standard set-up/break-dow [] Special set-up/break-dow	wn time (1/2 hour before & afte n time Time needed before		Time needed after event
Projected Attendance			
Contact Person	e-mail		
Work phone	Home phone		Cell phone
Faculty advisor (if SA organization	on) Facult	y signature (if SA orga	nization)
	l are required to use the University		[] Paid – general admission* keting needs. It is your responsibility to contact the NG SERVICES AGREEMENT HAS BEEN APPROVED BY THE
Production Equipment (please p Chairs Stands Conductor's Podium	provide as much information as Lectern Microphon Projector &	ue(s)	Choral Risers (for performers)
Keyboards (keyboard usage mus Piano		nce to facilitate tuning) rd (not available in Dier	s)
A	ll scheduling requests are subje	ect to approval by the S	chool of Music
	Complete the back side of th	is form if you have a g	uest artist.
	Submit completed form	to the School of Music	Office

FOR SCHOOL OF MUSIC USE ONLY

Approved: _

Date: _____

Distribution: Facilities Manager Piano Technician Community Relations Assistant Media Production Assistant Ticket Office