

# Thursday Noon Recital Performance Form ("Blue Card")

**Please fill out the following information and**

*turn in to Jessica in the Box Office or Lisa in the  
main office (PA 111), 5 days prior to the recital.*

Your Name: \_\_\_\_\_

Your E-mail: \_\_\_\_\_

Your Instrument or Voice Part: \_\_\_\_\_

Additional Performer(s) Name(s):

*(please print first and last name; separate additional performers with a comma)*

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Specific Voice Part or Instrument for Additional Performer(s):

*(in same order as above)*

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Date of Recital : \_\_\_\_\_

Instructor: \_\_\_\_\_

Accompanist Name: \_\_\_\_\_

Do you have the approval of your accompanist? (circle one)    yes    no

Title of Composition: \_\_\_\_\_

Specific Names of Movements: \_\_\_\_\_

Composer and dates: \_\_\_\_\_ (\_\_\_\_ - \_\_\_\_)

Performance Duration: \_\_\_\_\_ mins

*(in minutes; please be as accurate as possible)*