

DEPARTMENT OF MUSIC, THEATRE, AND DANCE
ARTS AT NOON
Arts At Noon Performance Application

Name of Performer/Director _____

Email _____ Cell Phone: _____

Performance Date Desired _____ Alternative Date Desired _____

Duration of Presentation (in minutes) _____

Title of Work: Include movements, larger work (if applicable), excerpted (if applicable)

Creator: Composer/Author/Choreographer --- Please include birth and death dates!

Names of all participants: Performers, Accompanists --- All names as to appear

Performance Needs: Please include necessary scenic, prop, lighting, and sound needs. If performance notes are needed, please include here.
