**Bemidji State University Department of Music**

# **Publicity Form – Student or Faculty Recitals**

***Complete and return this form to the Music Office at least four weeks prior to the recital date. Attach a list of the pieces you will be performing.***

Type of Recital: Degree 🞐 Faculty 🞐 Optional 🞐

Name Instrument/Voice type Hometown

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Parents’ Names (optional)

Major Minor

Date of Recital Time Place

Date of anticipated University graduation Degree

Hometown newspaper and/or radio stations

Names of other performers on the recital (including their instruments):

Additional biographical or program information you would like to include: