

Mu Phi Epsilon Foundation Artist Concerts

OFFICIAL BOOKING FORM

2011-2013 ARTIST:

YUKIKO SEKINO

SPONSORING CHAPTER _____
chapter school city

CO-SPONSORING CHAPTER(S) _____

CONCERT CHAIRPERSON _____

ADDRESS _____ tel _____
city state zip

CHAPTER PRESIDENT _____

ADDRESS _____ tel _____
city state zip

FACULTY ADVISER (if collegiate chapter is sponsor) _____

ADDRESS _____ tel _____
city state zip

CONCERT DATE: Please indicate three choices of dates, if possible. Ascertain availability of auditorium before requesting booking.

1st _____ 2nd _____ 3rd _____
date day of week date day of week date day of week

CONCERT INFORMATION (Please fill in as appropriate)

Solo _____ or joint _____ recital Solo with orchestra _____ choir _____ other _____

Time of concert _____ Place of concert _____

Guaranteed audience of : 75 (minimum) _____ ; 100 _____ ; 150 _____ ; larger _____

Photos paper _____ Electronic _____

Piano to be used: Make _____ ; Size _____ ; Condition _____ ;
Will it be tuned the day of the concert? _____

ACCOMPANIST _____ chapter can provide professional caliber accompanist (attach name and brief resume)

Type of accommodation being provided for artist at _____

Name & address of host (if available) _____

The required community service (if known) will be presented at _____

Date and time of community service _____

Does your chapter plan to make a contribution to the MΦE Foundation? _____

Which airport is most convenient to your city? _____

REGISTRATION DEADLINES: September 1 for October bookings
September 25 for Nov/Dec bookings
January 1 for Feb/May bookings

**ONCE DATE HAS BEEN CONFIRMED BY THE ARTIST CONCERT MANAGER, IT MUST BE KEPT.
FEE WILL BE FORFEITED IF CHAPTER CANCELS WITHIN 30 DAYS OF CONCERT DATE.**

SEND COMPLETED FORM (make a copy for your records) with \$250 REGISTRATION FEE
PAYABLE TO: MU PHI EPSILON FOUNDATION

SEND TO: BEVERLY W. ABEGG, ARTIST CONCERT MANAGER
8 PHILLIPS DRIVE
WESTFORD MA 01886-3409

QUESTIONS?: BEVABEGG@VERIZON.NET