

## Vaughan Concert Performance Application

Please complete entire application and return to:

Vaughan Concert Series Coordinator | 6187 Hopkins Center | Dartmouth College | Hanover, NH 03755

For questions regarding your application: 603.646.3531 | music@dartmouth.edu

Name(s) of Performer or Ensemble:

---

---

Requested Performance Date

List your first and second choice. Available times are Sundays at 4:00 and Wednesdays at 4:30pm:

---

Style of music to be performed (Please list instruments, voice parts, and composers):

---

---

Have you previously performed a Vaughan Concert? \_\_\_\_\_

Name of the Dartmouth faculty member endorsing your performance:

---

If you have not performed in the Vaughan Concert Series in the last 3 years, or you do not have the endorsement of a faculty member in the Dartmouth College Music Department, please provide a sample recording of your music unless other arrangements have been made.

Please provide the following contact information:

Mailing Address (honorarium check will be sent to this address):

---

---

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Honorarium check made payable to: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Application: \_\_\_\_\_