

# MUSICIANS REFERRAL SERVICE REQUEST FORM

Conservatorium Open Academy  
ABN 15 211 513 464



SYDNEY  
CONSERVATORIUM  
OF MUSIC

Step 1 – Contact Person/Organisation	Step 3 – Performance Request	
<p>Contact name _____</p> <p>Organisation _____</p> <p>Postal Address _____ _____ P/Code _____</p> <p>Email _____</p> <p>Tel (wk) _____ (home) _____</p> <p>Mobile _____ Fax _____</p>	<p>Type of ensemble (check the referral service guidelines)</p> <p><input type="checkbox"/> String quartet <input type="checkbox"/> String trio <input type="checkbox"/> Jazz ensemble</p> <p><input type="checkbox"/> Solo piano <input type="checkbox"/> Solo guitar <input type="checkbox"/> Early music ensemble</p> <p><input type="checkbox"/> Other _____</p> <p>Preferred music style/repertoire _____</p> <p>Dress requirements: <input type="checkbox"/> Formal Evening Dress (B &amp; W)</p> <p><input type="checkbox"/> All Black <input type="checkbox"/> Lounge Suit <input type="checkbox"/> Smart Casual</p>	
Step 2 – Event Details	Step 4 – Payment	
<p>Day and date for performance _____</p> <p>Duration of performance: From _____ To _____</p> <p>Type of event: <input type="checkbox"/> Wedding <input type="checkbox"/> Party <input type="checkbox"/> Launch/Reception</p> <p><input type="checkbox"/> Funeral <input type="checkbox"/> Other _____</p> <p>Venue _____</p> <p>Venue Address _____</p> <p>Location at venue _____</p> <p><input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors with cover <input type="checkbox"/> Outdoors with no cover</p> <p>Suggested parking for performers _____</p> <p>Time of arrival for set-up or rehearsal? _____</p> <p>Name of liaison person at venue _____</p> <p>Liaison person's mobile _____</p> <p>Alternative venue/location (if applicable) _____</p>	<p><input type="checkbox"/> In submitting this application I acknowledge that I have read and accept the Referral Service guidelines and responsibilities of all parties as outlined in the information section.</p> <p>I enclose the non-refundable administration fee of \$75.00. Payment is by:</p> <p><input type="checkbox"/> Cheque payable to 'University of Sydney'</p> <p>OR <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa</p> <p>Card number _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _</p> <p>Expiry Date _ _ / _ _</p> <p>Name on card _____</p> <p>Cardholder signature _____</p> <th data-bbox="826 1536 1516 1574">Step 5 – Forward application by</th> <p><b>Mail or in person:</b> Conservatorium Open Academy Musicians Referral Service Sydney Conservatorium of Music Macquarie Street, Sydney NSW 2000</p> <p><b>Fax :</b> 02 9351 1210 <b>Email:</b> con.musicianreferral@sydney.edu.au <b>Ph.</b> 02 9351 1240</p>	Step 5 – Forward application by

