



**DENVER SCHOOL OF THE ARTS
VOCAL DEPARTMENT SENIOR RECITAL ACCOMPANIST CONTRACT**

This agreement is between _____ (SENIOR RECITAL ARTIST),
address _____
email: _____,
phone: _____, and

Ryan Durfee
Denver, CO
rmdurfee@gmail.com
303-999-7499-Cell

OR _____
address _____,
email _____,
phone _____.

A) RECITAL INFORMATION

1. Date and Time of Performance: _____
2. Event Location: DSA CONCERT HALL
3. Arrival/Call Time: _____ (one hour before performance)

B) DRESS REHEARSAL INFORMATION

1. Date and Time of Performance: _____
2. Event Location: DSA CONCERT HALL
3. Arrival/Call Time: _____

Signed:

RECITAL ARTIST,

Signature: _____

Date: _____

Vocal Instructor: _____

ACCOMPANIST,

Signature: _____

Date: _____

RECITAL FEES:

Dress Rehearsal and Recital Fee and 2 hrs of rehearsal time **\$200**

Further Practice Fees (\$25 per hour) **\$25/hr x _____ hrs = _____**

Total _____

AMOUNT MUST BE PAID AT THE START OF THE DRESS REHEARSAL