

WIU UDT Reunion
Choreography Submission

Send to: Erin Rehberg by October 3

E: rebe_30@hotmail.com/C: 630-715-7913/A: 1841 Lascassas Pike, Apt. B22, Murfreesboro, TN 37130

Contact Information

Name: _____

Year Graduated: _____

Address: _____

Phone: _____

E-mail: _____

Program Information

Premiere [] or repertory []

Year choreographed: _____

Title: _____

Choreographed by: _____

Music by: _____

of dancers _____

Performed by: _____

(are any of them WIU alumni?) _____ If so, who _____

Length of piece _____ (Please limit to 12 minutes)

Special technical requests: (IF POSSIBLE)

Performance dates

-Please check all dates you are able to perform this piece

Additional materials

-Please provide, on a separate sheet of paper, a brief artistic statement. You may also include what you are exploring in this piece or any program notes.

-Please include a DVD work sample 2-3 minutes, cued for viewing

-Label the video with performance date, venue, or specify if this is rehearsal footage

-Include S.A.S.E. if you want your video/DVD returned to you

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[] Thursday December 3 [] Friday December 4 [] Saturday December 5

-Please check the dates you are able to be in Macomb to Tech this piece

[] Wednesday December 2 [] Thursday December 3

[] Friday December 4 [] Saturday December 5

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