

Texas State University and San Marcos High School
Pre-UIL Concert Clinic
San Marcos High School Auditorium
March 27, 28 & 29, 2008

APPLICATION FORM

Name of School: _____

Ensemble Name: _____

Conductor: _____

Repertoire: 1. _____

2. _____

3. _____

Preferred Date of Performance: March 27 March 28 March 29
(Circle One)

Preferred Time of Performance: _____ AM _____ PM
(Circle One)

Name of School Contact: _____

School Address: _____

Phone Number(s): _____

E-Mail: _____

Please return form and payment (\$400) to:

Dr. Rodney C. Schueller
Texas State University
School of Music
601 University Drive
San Marcos, TX 78666
rs34@txstate.edu
Fax: 512-245-1717

****Please make checks payable to: Texas State University Bands****
Priority for performance dates and times will be given on a first-come,
first-served basis.