**Program**

**Title**  Composer

Date

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Date

This recital is presented in partial fulfillment of the requirements for the Bachelor of Fine Arts degree in Music Performance**. STUDENT NAME** is a student from the studio of **NAME**. For more information about this or other music events, please call (304) 696-3117.

If you would like to support the School of Music through a donation and assist with student scholarships, academic travel for students and ensembles, or general support of MU music please contact:

School of Music

SMH 154/ 304-696-3117

music@marshall.edu

**

## School of Music

## 

presents

**XXXX Recital**

**Student Name,**

**Instrument**

assisted by

**XXXXX**

**Date**

**Location**

**Time**

This program is presented by the College of Arts and Media through the School of Music. For more information about this or other music events, please call (304) 696-3117, or view our website at [www.marshall.edu/cam/music](http://www.marshall.edu/cam/music).

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Program Notes

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