



## REQUEST FOR USE OF PIANO PRACTICE ROOM

**Fall 2024 – Spring 2025**

### **Piano Practice Room Policy**

The following policies are necessary to ensure fair and timely access for students, to maintain the quality of the instruments and facilities, and for security purposes. **Violations of any of the rules may result in the suspension or revocation of your practice room access.**

Eligible users include members of department-sponsored ensembles, students currently enrolled in harmony, theory, functional piano, or private lessons, and music faculty.

Users must sign up for a practice room at the beginning of the semester with the division Sr. Administrative Assistant, Meghan Wilfong, in BPAC 104. Once approved, you will need to contact Angelique Erfurt at (254) 299-8328 to have your MCC ID programmed for access to the piano practice room. **SHE IS NOW LOCATED AT THE MCC POLICE STATION!**

### **Users must also read and sign the Piano Practice Room Policy:**

1. **No food or drink** is allowed at any time.
2. Do not let anyone who is **NOT** assigned to your practice room have access. Groups of 2 or 3 must have special approval from the Division Chair, Mandy Morrison.
3. **Do not** place books, backpacks, instrument cases or any other materials on top of the piano.
4. **Do not** write or erase on or over the keyboard.
5. When you leave a practice room, take all personal items with you, turn off the lights and close the door until it locks. (*check door handle to be certain it is locked*)
6. Personal items left overnight may be disposed of.
7. If you leave the room for more than 10 minutes, you give up possession of the room.
8. No private teaching in the practice rooms except by department authorization.

**I have read the Practice Room Policy and I agree to all terms and conditions.**

**Upon entering the practice room, I will assess the condition of the piano and the room and report any damage within the first 5 minutes.**

**I agree to be held financially responsible for any damage to the piano not reported to departmental authorities within the first 5 minutes of my access to the practice room.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Name (please print) \_\_\_\_\_ ID# \_\_\_\_\_

Practice Room Number (please circle one) PAC 132, 133, 136, 137, 138, 139, 140, 141, 142