Music Library
Recording Request

Date: ___________________   ID #: ___________________

Name: _______________________________________________________

Email: _______________________________________________________

Phone: _______________________________________________________

Number of copies: __________________ (Maximum of 3 copies; for orders over 3, contact Jennifer DeVito at x2-7115)

Material to be copied:

_____ Provided by patron (Length: ________________________________)  

_____ Staller Center Concert/Recital

Title: _________________________________________________________

Performance Date: _____________________________________________

Additional information: _____________________________________________________________________________

You must be a Stony Brook University student, faculty, or staff member to request a recording. You must also have performed in the piece or have received written permission from the performer.

The copyright law of the United States (Title 17 U.S. Code) governs the making of copies of copyrighted sound recordings. Under certain conditions specified in the law, libraries are authorized to furnish a reproduction. One of these conditions is that the reproduction is not to be "used for any purpose other than private study, scholarship or research." The person submitting this request is responsible for respecting the copyright of the performers. The Stony Brook University Libraries reserves the right to refuse to accept a recording request, if, in its judgment, fulfillment of the order would involve violation of copyright law or if the material supplied would damage library equipment. The Stony Brook University Libraries is not liable for damages to any materials supplied.

PLEASE NOTE: Requests may take 2-4 weeks for processing. We are NOT a professional recording service and cannot promise professional quality recordings. You will be notified via email that your recording is ready for you to pick up at the Music Library Circulation Desk.

- Library Staff Use -

Received by: _________________________________________________  Date: ______________

Duplication completed by: _____________________________________  Date: ______________

Signature of requester upon receipt: ______________________________  Date: ______________