

ST. ANDREW'S EPISCOPAL CHURCH A place of Hope, Healing and Hospitality

509 E. Twiggs Street Tampa, FL 33602 813.221-2035 www.saintandrewstampa.org

Polyphony Workshop and Solemn Vespers Led by Deborah Roberts

Saturday, February 11, 2017 - 9:30 AM to 4:30 PM Vespers at 5:00 PM

St. Andrew's Episcopal Church is pleased to host what we hope will be the first of many polyphony workshops in the Tampa Bay Area! This great day of musical learning and singing will be led by the renowned singer, teacher and conductor, Deborah Roberts*. The workshop will focus on music by Tomas Luis de Victoria and will culminate in a sung Vespers service at 5:00 P.M. While there is a cost associated with the workshop, the Vespers service is free and open to the public.

All interested singers are invited to attend! Course tuition is \$50 per person (\$35 for students) and includes lunch and course materials via e-mail. <u>Group discount (20%) available for groups of 10 or more!</u> PLEASE NOTE, YOU MUST HAVE YOUR NOTES LEARNED BEFORE THE WORKSHOP!

Please complete the attached registration form and mail it with your payment to St. Andrew's Episcopal Church at the address above. Contact Maggie Coleman, Music Program Director, at mpd@saintandrewstampa.org for additional information.

*Deborah Roberts formed Musica Secreta in 1990 with the harpsichordist John Toll. Her soaring soprano has featured in many of the leading early music ensembles in the UK, and as a member of the Tallis Scholars for over 25 years, Deborah has a lifetime's experience of singing Renaissance polyphony. She co-founded the Brighton Early Music Festival in 2002, and has watched it grow to become one of the largest and most innovative music festivals in Britain. She is in constant demand as a teacher, workshop leader and choral conductor, and currently runs two amateur chamber choral ensembles, the BREMF Consort and Musica Secreta's sister choir, Celestial Sirens.



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Polyphony Workshop – REGISTRATION Saturday, February 11, 2017 - 9:30 AM to 4:30 PM*

Name (as you wish it to appear on your name badge):
Address:
City, State and Zip
Voice part preferred: (please be specific, i.e. S1, S2, etc.)
Voice part, second choice:
Student? Yes □ No □ If so, name of school:
Please indicate any food allergies or dietary restrictions for lunch:
If participating as a member of a group, please indicate group name:
E-mail address for delivery of scores and announcements:

^{*}There will be a 1 ½ hour break for lunch from 12:00 to 1:30 P.M.