



Facility Use

Sound / Video/ Lighting Equipment Request

(To be completed only for events requiring equipment use)

Name: _____ Phone: _____
 Event: _____

Location: _____ indoors outdoors

Date: _____ Starting time: _____ Ending time: _____

What is the purpose of the event? _____

What time can we get in the building to set it up? _____

Who is in charge of the event? _____ Phone: _____

Estimated attendance: _____

Video

What equipment is needed?

- ___ Projector
- ___ Laptop
- ___ Screens
- ___ Words (needs to be turned in at least 5 days prior to the event)
- ___ PowerPoint (needs to be turned in at least 5 days prior to the event)
- ___ Videos

Lights

What type of lights do you need?

- ___ Colored
- ___ White

What are they going to be on?

- ___ A Band
- ___ Someone speaking

Are you bringing any of your own lights? If yes, what kind? _____

Sound

What kind of sound needs to be amplified?

- ___ CDs
- ___ DVDs
- ___ A person or a group of people speaking
- ___ A band

If there is a band what instruments will need to be run through the system?

- ___ Guitars: What kind? (bass, acoustic, etc) _____
 How many? _____
 Do they need to have a mic? yes no
- ___ Piano
- ___ Drums
- ___ Vocalists: How many? _____
- ___ Other instruments: _____

Comments or special requests: _____

Filling out this form does not guarantee the use of any equipment