



SESSION REQUEST FORM

Information

Name:

Date:

Email:

Phone:

Address:

Recording Package: ☐ 8hr. (Day lock-out) ☐ 16hr. (Weekend) ☐ 1hr. (Ala carte)#____hrs.

How many songs are you recording? _____

Do you have musicians? ☐ Yes ☐ No

Do you need musicians? ☐ Yes ☐ No

☐ Drums ☐ Bass ☐ Guitar ☐ Keys

☐ Vocalist ☐ Other _____

What genre music are you recording? _____ How many band members? _____

How do you plan on tracking? ☐ "Live" as one group ☐ individually tracked parts

Recording format for tracking? ☐ Digital (Protools) ☐ 2" Analog Tape ☐ Radar 24

Will you need a specific instrument to be available at your session? ☐ No ☐ Yes (list below)

Instruments: _____

Will you need a recording engineer? ☐ Yes ☐ No, we will bring a very experienced one.

Special requests or instructions regarding your session: