

EVENT EQUIPMENT REQUEST

(a signed request for Facility Form must be on file)



(Name of Organization)/Name of Person Responsible)

Phone: _____ Email: _____

Date(s) of event: _____

Date/Time equipment needs to be in place by: _____

Will event tech assistance be required? YES NO

Audio/Visual*

- Projector
- PowerPoint computer
- DVD Player
- TV
- Internet wired wireless
- Portable Projector Screen
- Sound system
(larger systems require Sch/Com support)
 - 1 wired microphone w/straight stand
 - 1/8" input cable for personal device input
 - CD player
- Piano
- Portable stage lighting
- Portable Follow-spotlight

Additional Equipment

- Chairs # _____
- Tables # _____
- Easel # _____
- Table skirt
- Extension Cord
- Pipe & Drape
- Stanchion
- Lectern
- Music Stand
- Portable platform

Kitchen*

- trash cans
- access to water
- Ice machine
- Warmer
- Refrigerator
- Ovens

* - may require school employee on site during event & additional charge s

Additional Notes/Comments/Requests

FOR OFFICE USE:

Site Building Administrator/School Community Office

Date

Approved

Denied

Comments: _____

_____ date received by School/Community Office

Contract # assigned _____