

PRODUCTION TEAM – EVENT PLANNING FORM OUTSIDE

(Please give this for to Sherrill Miller, Production Team Coordinator, at least 1 week prior to first rehearsal.)

A. General Information:

Event Director: _____ **Phone:** _____ **Date:** _____

Name of Event: _____ **Sunday Service** **Special Event**

Organization: _____ **Date of Event:** _____ **Time:** _____

Rehearsal #1 Date: _____ **Time:** _____ **Rehearsal #2 Date:** _____ **Time:** _____

Location: Front Yard East Parking Lot West Parking Lot Courtyard Hatfield Parking Lot
(Please mark on drawing)

Number of People Expected at Event (approximate): _____

B. Sound Information:

Sound Tech needed Yes No

Microphones Needed (state quantity):

Stand Microphones: _____ (put location on drawing on back of sheet.)

Handheld Microphones: _____ (put location on drawing on back of sheet.)

Lavaliere Microphones: _____ **Face Microphones:** _____

CD's: _____ **Cassette Tapes:** _____

Speakers Needed: Yes No

C. Lighting Required: Yes No **Quantity:** _____ (indicate on drawing where lighting is required.)

Type of Lights Required: _____

D. Risers Needed: Yes No **Quantity:** _____ (Please mark location on drawing on back of sheet.)

E. Comments: _____

Note: See back of this form for drawing of the Outside Campus areas to mark the location of performers and/or equipment.

OUTSIDE AREAS

