



EVENT SETUP REQUEST

Submit this to an AVA co-head
7 days **before** the earliest date!

EVENT DETAILS

Event name.....

Other/rehearsal dates.....

Date *Y Y Y Y - M M - D D* *Mon Tue Wed Thu Fri*

Time start..... End.....

Organizing group.....

Email address.....@ocdsb.ca

LOCATION

The auditorium The gym Elsewhere.....

The cafeteria The mall.....

EQUIPMENT

#.....Wired microphones AVA-supplied music Other stuff.....

#.....Pairs of speakers Lighting.....

MEDIA (you bring these)

Online content DVD or tape Extras.....

Offline files Music player (beware!).....

Is something not on this form? Write your special requests on the back of this sheet.

We'll review your form and contact you with our verdict. **Don't forget to double check your form!**

Supervisor's signature.....on *Y Y Y Y - M M - D D*

(You can even submit your form online! ava.shoutwiki.com)

VERDICT:

by.....on *Y Y Y Y - M M - D D*