



# Reynolds High School Arts Building Facility Request

Please complete this form, and return to the Fine & Performing Arts Coordinator.  
An in-person meeting may be required to determine scheduling and technical needs.

Event Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Group Name: \_\_\_\_\_

Type/Description of Event: \_\_\_\_\_

Number of Participants: \_\_\_\_\_ Audience Size Expected: \_\_\_\_\_ Fundraiser? ☐ No ☐ Yes If yes, submit a Fundraiser Request Form to the Activities Director

## Contact Information

Requestor Name: \_\_\_\_\_ RSD Staff Supervisor at Event: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

RSD Phone Extension (if applicable): \_\_\_\_\_ Cell/Day of Phone: \_\_\_\_\_

Cell/Day of Phone: \_\_\_\_\_

Event Schedule (check Master calendar prior to submitting request, <http://reynoldssd7.tandem.co/>)

Date(s) of Event \_\_\_\_\_ Day(s) of Week \_\_\_\_\_

Fill in all bolded times, and others that may apply. For multi-day event, please attach list of dates and times.

<b>Arrival/Set Up</b> _____	<b>House Opens</b> _____
Start Tech Rehearsal _____	<b>Event Starts</b> _____
Break _____	<b>Event Ends</b> _____
Prep Stage _____	<b>Clean Up Ends</b> _____

## Event Technical Requirements (if unsure, we can discuss)

<b>Rooms:</b> <input type="checkbox"/> Lobby <input type="checkbox"/> Auditorium <input type="checkbox"/> Choir Room <input type="checkbox"/> Makeup Room <input type="checkbox"/> Black Box <input type="checkbox"/> Box Office <input type="checkbox"/> Concessions Stand <input type="checkbox"/> Other: _____	<b>Sound:</b> # of Wireless Handheld Mics (up to 5) _____ # of Wired Mics (up to 5) _____ # of Regular Mic Stands _____ # of Piano/Guitar Mic Stands _____ # of Gooseneck Mic Stands _____ Monitors? <input type="checkbox"/> Sides of stage or <input type="checkbox"/> Front of stage Audio Playback? <input type="checkbox"/> CD <input type="checkbox"/> Files <input type="checkbox"/> Onstage Aux (self-run) <input type="checkbox"/> Mid-House Aux (self-run)	<b>A/V:</b> <input type="checkbox"/> Projector for Visuals <input type="checkbox"/> Presentation has Audio Please bring a device and dongle that connects to VGA (or bring your own HDMI cable)	<b>Curtains:</b> <input type="checkbox"/> Green Grand Drape <input type="checkbox"/> Black Midstage Traveler <input type="checkbox"/> Black Upstage Traveler <input type="checkbox"/> White Cyc
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<b>Lights:</b> <input type="checkbox"/> Front Stage Lighting <input type="checkbox"/> Full Stage Lighting <input type="checkbox"/> Special Lighting (discuss in person) House Lighting during performance: <input type="checkbox"/> Out, <input type="checkbox"/> Half, <input type="checkbox"/> Full	<b>Other:</b> <input type="checkbox"/> Mid-House Configuration <input type="checkbox"/> Preshow music needed? <input type="checkbox"/> Upright Piano <input type="checkbox"/> Grand Piano <input type="checkbox"/> Acoustic Shells <input type="checkbox"/> Conducting Podium <input type="checkbox"/> Double-Wide Music Stand	# of Music Stands _____ # of Black Chairs _____ # of Risers (up to 8) _____ # of 6' Rectangle Tables (up to 7) _____ # of Round Tables (up to 6) _____ # of Speaking Podiums (up to 2) _____ # of Lobby Chairs _____
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List additional technical requirements on the back or in your email. If a specific layout is needed, please attach a diagram.

## Office Use Only

☐ Event Approved ☐ Event Denied ☐ Added to Master Calendar  
Copy sent to: ☐ Requestor ☐ Arts Custodian ☐ Head Custodian ☐ Arts Coordinator ☐ Other: \_\_\_\_\_

Date Received: \_\_\_\_\_ Reviewed By: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_