Wellin Hall Event Form

GENERAL INFORMATION
Title/Type of Event _______________________________ Department ________________ Phone ________________
Contact Person ("producer") ____________________
Event Date _______ Event Time _______ Length of Event __________ Setup Time __________

STAGE SETUP AND NEEDS
Please mark the diagram that best suits your event: (if possible, indicate location of mics, podium, chairs, etc. if needed)

Tech tier curtains: ______ Fully stored, ______ Mostly stored, ______ Fully drawn
Curtain at back of stage: ______ Fully stored, ______ Fully drawn
Stage Extension: ______ Wherever ______ Up ______ Down ______ Pit level Account # ___________________

Name of Student Manager (if applicable): ___________________________; phone # ___________________
Will the piano be needed? ______ yes ______ no Will the harpsichord be needed? ______ yes ______ no
Are dressing rooms needed? ______ yes ______ no

TECHNICAL NEEDS (check those that are required)
Sound Reinforcement ______ speech; ______ music Recording Technician ______ archives; ______ broadcast
AV Technician (slides, video/audio playback) ______ Standard Lighting Needs only ______ Lighting Technician required (special lighting, follow spots, etc.)

PERSONNEL NEEDS (check those that are required)
____ Box Office ______ If required, what are the ticket prices? __________
____ Ushers ______ Merchandise Sales help

PARKING AND LOAD-IN NEEDS
Anticipated off-campus attendance ______ Will loading dock be needed? ______ yes ______ no
Bus or Truck parking needed? ______ yes ______ no Additional Security; Account #: ___________________

RECEPTION
Will a post-event reception be held? ______ yes ______ no Where: Schambach 108 or Wellin Lobby circle one

PUBLICITY
For events sponsored by the Department of Music or by the Department of Theatre and Dance, please consult with
the Performing Arts Administrator regarding publicity. For all other events, the producing organization is
responsible for all aspects of publicity.

Signature of Contact (producer): ____________________________ Date: __________

For Office Use Only:
____ No Meeting Needed; ______ Meeting Needed; must schedule one month prior to event;
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