

# REQUEST FOR AUDIO AND/OR VISUAL EQUIPMENT

<b>Date of Event:</b>	DAY _____	DATE _____	TIME am/pm TO - _____ am/pm
<b>Room Assigned:</b>	_____		
<b>Description of Event:</b>	_____		
<b>Contact Person:</b>	NAME: _____	PHONE & EMAIL _____	

## AUDIO - VISUAL EQUIPMENT

MICROPHONES	QTY	VISUALS
Wireless Handheld		<b>Projector (Small)</b> Fellowship Hall or Meeting Room
Wireless Headset		<b>Projector (Large)</b> Sanctuary Only
Lavalier's		<b>MEDIA to be Submitted? (Circle All That Apply)</b>  PowerPoint   Video   Other: _____
Other		
Mic Stands-Podium		<b>Description:</b> What is being presented?

## MEDIA REQUESTED FOR \*\*\*WORSHIP SERVICES\*\*\*

MEDIA	MINUTES	TRANSFER FORMAT:	Flash Drive	CD	DVD
PowerPoint		(Circle All That Apply)			
Video					
Audio					
<b>PASTOR APPROVAL</b> (Must be signed by Pastor Caleb)		(Caleb Hong) X _____			

## SPECIAL REQUEST FOR VIDEO RECORDING OF EVENT

<b>Video Record Event:</b>	Yes _____	No _____
<b>Editing of Video after Recording?</b>	Yes _____	No _____
<b>Delivery Format: (Circle one)</b>	Flash Drive   -   CD   -   DVD	

### FEES

Audio Tech	\$ 50 *3 Hours or less	Fees Pertain Only to Outside Groups (If we are creating visuals, additional time will be added to hours)
Visuals Tech	\$ 50 *3 Hours or less	
Video Recording	\$ 50 *3 Hours or less	
Video Editing	\$ 50 *3 Hours or less	

**Put completed form in AV Mailbox in the Church Office. If unsure what equipment you will need, complete the top box and put form in the AV Mailbox. An AV Tech will contact you.**

**Date of Request** \_\_\_\_\_