

SSISD Auditorium Technical Request Form

Event: _____ Contact: _____

Cell# _____ Email: _____

Dates of Rental: _____

Equipment Request:

- | | |
|---|--|
| <input type="checkbox"/> Microphone (Wireless) _____ | <input type="checkbox"/> Projection _____ |
| <input type="checkbox"/> Microphone (Hanging Choir) _____ | <input type="checkbox"/> Internet Access _____ |
| <input type="checkbox"/> Monitors _____ | <input type="checkbox"/> Spotlights _____ |
|
 | |
| <input type="checkbox"/> Lectern _____ | <input type="checkbox"/> Foyer _____ |
| <input type="checkbox"/> Risers _____ | <input type="checkbox"/> Dressing Rooms _____ |
| <input type="checkbox"/> Acoustic Shells _____ | <input type="checkbox"/> Tech Theatre Shop _____ |
| <input type="checkbox"/> Chairs _____ | <input type="checkbox"/> .. |
| <input type="checkbox"/> Tables _____ | <input type="checkbox"/> .. |

Official Use:

- Civic Center Notified
- SSISD Maintenance Notified