

# CAMDEN OPERA HOUSE LOGISTICS PLANNER

## ORGANIZATION INFO:

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone # \_\_\_\_\_

e-mail : \_\_\_\_\_

Fax # \_\_\_\_\_

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Times:

Start: \_\_\_\_\_

End: \_\_\_\_\_

Approx. # of guests: \_\_\_\_\_

Additional Info:

## SET-UP INFO:

Area Used (circle): Auditorium

Tucker Room

Washington Street CR

Third Fl.

Type of event (circle):

Meeting

Performance

Wedding

Other

Details: \_\_\_\_\_

Equipment:

podium

microphone(s)

screen

easel(s)

A/V cart

table(s)

chair(s)

trash cans

other

Details: \_\_\_\_\_

Will you be serving food? Y / N

Do you need the lobby for registration? Y / N

Caterer name = \_\_\_\_\_

phone # \_\_\_\_\_

Will you allow photography during the event/performance? Y / N

Can you provide posters / signage? Y / N

Intermission? Y / N

Length/Time \_\_\_\_\_

Ticket/Promotional Info:

Stage / Lighting / Sound info:

Piano? \_\_\_\_\_

Remove seats for wheelchairs? Y / N

How many: \_\_\_\_\_

Thrust: \_\_\_\_\_

## DAY/NIGHT OF EVENT:

Authorized Contact Person: \_\_\_\_\_

# of Staff/Participants \_\_\_\_\_

Arrival/load-in time: \_\_\_\_\_

Additional Info:

## OFFICE USE:

Keys issued: \_\_\_\_\_

Returned: \_\_\_\_\_

EM= \_\_\_\_\_

other: \_\_\_\_\_