UNI School of Music  EVENT DETAILS SHEET

Event Name: ___________________________ Date: ______________________

Contact Name: ___________________________ Phone: ______________________

Performance time: ___________ How long will the show be: ________________

Will there be an intermission? YES ☐ NO ☐ If so, how long? 10 mins ☐ 15 mins ☐

Will you host any guest artist or ensemble for this event? YES ☐ NO ☐

If so, who? ___________________________ When will they arrive? ____________

Will there be a bus(es)? YES ☐ NO ☐ If so, do they know where to park? YES ☐ NO ☐

Will there be a reception before or after the show? YES, BEFORE ☐ YES, AFTER ☐ NO ☐

Will you need any tables set up in the lobby? YES ☐ NO ☐ If so, how many? ______

Do you need the piano tuned for this event? YES ☐ NO ☐ If so, which one? ______

Are you expecting any audience member groups with special needs? (i.e. wheelchairs, etc.)

YES ☐ NO ☐ If so, please describe: __________________________________________

Any additional setup needs or notes for the setup crew? (i.e. risers, pianos, etc.)

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