# LEE HALL AUDITORIUM

## EVENT SUMMARY FORM

1601 South Martin Luther King Jr. Boulevard - Room 111-A - Tallahassee, FL 32307 • (850) 561-2649 voice • (850) 561-2983 fax

All requests must be submitted no later than five (5) WORKING days before the scheduled event.

## USER INFORMATION

<table>
<thead>
<tr>
<th>Contact Person:</th>
<th>Telephone Numbers:</th>
<th>Telephone Numbers: (w)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization:</td>
<td>FAX:</td>
<td>e-mail</td>
</tr>
<tr>
<td>Address:</td>
<td>(h)</td>
<td>Account Number:</td>
</tr>
</tbody>
</table>

## Event Name/Purpose

Event Date: __________

Event Time: __________

(Note: Only One Date Per Event Summary Form)

Estimated Length of Event: __________

User Arrival Time: __________

## SECURITY PLAN

☐ SECURITY PLAN: Number of Officers __________ Hours on Site: __________ (confirmation attached)

☐ INSURANCE APPROVAL (confirmation attached)

☐ DEPOSIT PAID (confirmation attached) EVT. MANAGER __________

## PRODUCTION NEEDS - This section Must be filled out completely for booking to be accepted:

General Description (Awards Ceremony, Performance, Conference, etc.):

PARTICIPANTS: Please give the number of people participating in the following categories

- MC/Speakers __________
- Performers __________
- Technicians, Stage Managers, Directors __________
- Band/Music Groups __________
  (Number of groups/number of people in each group)

Lighting Needs:

Audio Needs:

Facility Needs (dressing rooms, drops, screens, furniture, etc.):

## OFFICE USE ONLY

Crew Time In: __________

Crew Time Out: __________

Notes: __________