



AV Request

Committee/Group: _____ Date: _____

Reason: _____ Phone / Cell#: _____

Requested By: _____ Email: _____

Event Date: _____ Time: _____ Setup: _____ Vacated By: _____

Rooms Requested: One-time use: Yes _____ No _____

Sanctuary _____	Activity Room _____	Room 18 _____
Kitchen _____	Fellowship Hall _____	Room 19 _____
Quiet Room _____	Patio _____	Room 20 _____
Downstairs Chen _____	Room 16 _____	Room 22 _____
Upstairs Chen _____	Room 17 _____	Room 23 _____

Equipment Needed: Yes _____ Please specify: _____

Need to hook up: Bass: _____ Guitar: _____ Keyboard: _____ Other: _____

Need to run: CD: _____ DVD: _____ Movie: _____ YouTube file: _____ Other: _____

***ALL files need to be provided to FUMC one week prior to event. You can drop it in the office or email it to the below address. To Sandy Kiyohara @ communications@faithsouthbay.org.**

Type of File. Please specify: _____

Microphones: Hard wire: _____ Qty: _____ Cordless: _____ Qty: _____

Need assistance to Setup/Run: Yes _____ No _____

Regular use at each meeting: Yes _____ No _____

Equipment I will bring: PC: _____ MAC: _____ Please bring your adapters to connect your equipment.

Notes: _____

Trained Staff to Run It: _____ Phone / Cell# _____

AV Coordinator Approval: _____