Newport Performing Arts Center

Technical/Equipment Requirements: Name if Group: NHS ADMIN Name of Event 9th - 11th GRADE PARENT REGISTRATION NIGHT Event Date 3-06-17 **Phone** 7447 **Contact** Thomas Gangle Email ganglet@bsd405.org Day of Event Contact Name and Number (if different from above) **Additional Rooms Used**: (some rooms require approval and scheduling through the school) □ Green Room □ Ticket Booth ¬Commons/Lobby □ Cafeteria □Other: **Expected Attendance** 300 Number of Performers **Event Description:** Time In Date House **Event Start Event End** Breakdown (set-up) Time Time time Opens i.e. 4/5/2016 4:00pm 7:00pm 7:30pm 9:00pm 10:00pm 3/6/17 5:30 pm 6:00 PM 6:30 pm 8:30 pm 9:00 pm Stage/Scenery: Grand Drape Circle: Open or closed Center Traveler Circle: Open or Closed Cyc ☑ **Podium/Lectern** *Identify which side of stage* R C L ☑ Projection Screen (front projection only) ☐ Projector: Computer or dvd Player (user must provide computer, no MAC support) □ Bringing Set/Scenery Pieces: description ☐ Flown Scenery*: description *May require additional staff depending on use **Audio:** Indicate number needed. Number provided indicates how many available. Microphones: Wireless 3 (2) □ Lapel 2 () □ Wired 9 () □ Choir () □ Floor/Boundary () □ Mic Stands () Boom or straight □ Monitors □ CD Player □ Headsets **Lighting:** Lecture (apron only) Standard (stage wash, can be operated by user) □ **Custom** — Requires additional technician or user provided designer approved by the PAC Coordinator. Colored gels must be provided by the user. □ **Spot light** — Requires additional technician or user provided operator approved by the PAC Coordinator/site supervisor. **Additional:** These are available with an additional cost to public users

Set-Up Diagram/Comments: (any additional needs i.e. chairs in green room, etc.)

□ Music Stands () □ Choir Risers () □ Piano upright only □ Clouds □ Orchestra Pit

□ Folding Chairs () □ Tables () □ Band Risers