

THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE AND ART
AUDIO-VISUAL RESOURCE ACCESS CENTER
Technical Data Sheet

Title of Event: _____

Date of Event: _

Space: _____

Contact Person: _____ Phone: _____

Technical Contact Person: _____ Phone: _____

AV Specifications:

1) Lighting Requirements (Number, Type, Placement, General Description):

- _____

2) Sound Requirements:

- Number of Microphones & Positions: _____

3) Will you be playing audio, video, or slides from a laptop or DVD player:

- _____
- Other A/V Needs: _____

4) Length of Program: _____

5) Time of Arrival on Day of Event: _____

- Sound Check (at least 30 min): _____
- Doors open: _____
- Start: _____

6) Number of Performers/Participants: _____

7) Brief description of program:

- _____

Please return completed:
AT LEAST TWO WEEKS PRIOR
to: avstaff@cooper.edu

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