

YSU Percussion Gear Request Form

Date of request:_____

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Person filing request (ensemble director, student):_____

cell phone._____office phone._____

email: _____

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Event title/description:_____

Is this an official YSU sponsored event?: (circle one) Yes No

Event date(s): _____Event time(s): _____ Venue: _____

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Transport Logistics:

Load-in:

Pick-up location (Bliss Hall room number)....._____

Pick-up date:....._____

Pick-up time (may be no later than 1PM)....._____

Dress Rehearsal info:

date: _____ time: _____ location:_____

Load-out:

Date:....._____

Time....._____

Return to location (Bliss Hall room #) _____

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Office use only:

Date received: _____

Gear list attached: Yes No Not necessary (circle one)

Glenn Schaft signature: _____ date_____

Perc GA signature:_____date_____