



Equipment Fees
\$____ Per JBL Speaker
\$____ Per Lighting Fixture

Equipment Request

* = Required

*Name: _____

*Date: ____/____/____

*Phone #: (____) - ____ - ____

*Student: _____

*Faculty: _____

*Organization: _____

*Faculty Sponsor: _____

*Date Needed: ____/____/20____

*Date will return: ____/____/20____

*Reason for equipment request:

Equipment Needs (Please check all that apply)

JBL Speaker Qty: _____

XLR Cable Qty: _____

iPod connection capabilities

Inst. Cable Qty: _____

Microphones Qty: _____

Mic Stand Qty: _____

Light Fixtures Qty: _____

Ext. Cords Qty: _____

Power Strips Qty: _____

Direct Box Qty: _____

Other: _____

All equipment is subject to availability.

Equipment fees will go towards the replacement of old equipment or general funding of
Campus Ministries

Campus Pastor Only

Campus Pastor Approval: _____

Date: ____/____/____