

MPR SET-UP CHECK LIST

NAME OF APPLICANT:			
CONTACT #: ()		_ ALT. CONTACT #: ()
EVENT DATE:/	/	SET UP TIME:	AM / PM

INDICATE TABLE TYPE NEEDED, AMOUNT OF TABLES NEEDED, AND AMOUNT OF CHAIRS PER TABLE (SEE REVERSE SIDE FOR TABLE-CHAIR RATIO):

CARD TABLE (about 4ft)	#	CHAIRS PER
ROUND TABLE (5ft / 60in)) #	CHAIRS PER
BUFFET TABLE (8x3ft)	#	CHAIRS PER

INDICATE OF NEEDED:

DANCE FLOOR	12x15	12x12	12x9	12x6	8x6
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- ADDITIONAL CHAIRS # _____
- KITCHEN
 - A/V EQUIPMENT

THE FOLLOWING CONDITIONS APPLY:

- This document must be returned to the NSCA Office seven (7) business days prior to the event in order to schedule event set-ups.
- Set-up requests not received in the designated appropriate timeframe will not be honored.
- No "last minute" changes will be accepted.

