



Please return this form (AT LEAST **30 DAYS** PRIOR TO EVENT DATE) via fax to: 503.213.6072

School Name on contract

Contact ID #
(found near the top left side of your contract.)

GENERAL INFORMATION:

Contact Name: _____

School Name: _____

Event Date: _____

Event Type: _____

Event Location: _____ (gym, cafeteria, commons, ect)

Students Arrival Time: _____

Student Dress Code: _____ DJ Dress Code: (see the contract line 17)

Dance Setting: Indoors Outdoors

What floor is the dance on _____ (as per the contract line 9, remember that if we must move equipment up and down stairs there will be a stair fee. The stair fee is \$25.00 per flight or every 10 steps. This must be paid the same day of the event and at the start of the event.)

Is there an elevator? Yes No

Number of Students expected: _____

Will there be awards, door prizes, drawings? Yes No

Event Theme: _____ Theme Song: _____

Planning groups top 6 song requests (we will do our best to make sure the requests are played):

1: _____ 2: _____

3: _____ 4: _____

5: _____ 6: _____

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School Planner