Event Date(s) and Time(s)
- Date ______________
- Time ______________

Event Checklist
- Expected attendance:_____
- Auditorium style seating or dinner tables:_____
- Open reception or gallery show:____
- (if tables) Rectangle or Round (round are an added expense):____
- Projector screen:_____  
- Podium (AV needs mic,music,etc):_____  
- Catered (Buffet style , Plated, Snacks and Drinks):_____  
- Living Room:_____  
- Signed and/or Greeting Table:_____  

Event Setup
- Formal or Casual:_____
- Lecture or Panel:_____  
- Public or Private:_____  
- Signage or Not:_____  

Gallery Usage Checklist