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| **Society:****Society Event Running Order**Please fill in both the **SOUND CHECK** and **RUNNING ORDER** (located below) |  |
| **Name of Event:** |  |
| **Date:** |  |
| **Venue:** |  |
| **Point of Contact:** |  |
| **Contact Number:** |  |

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| **Sound Check Running Order** |
| **Start Time** | **End Time** | **Performer** | **Description** | **Audio Requirements** | **Lighting Requirements** | **Video Requirements** |
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| **Please provide an accurate running order for your event. From the time doors open to the end of the event.**  |
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| **Event Running Order** |
| **Start Time** | **End Time** | **Performer** | **Description** | **Audio Requirements** | **Lighting Requirements** | **Video Requirements** |
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