## Studio Reservation

<table>
<thead>
<tr>
<th>NAME</th>
<th>PROJECT</th>
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**FROM: Date / Time (1st Choice)**  
**TO: Date / Time (2nd Choice)**  
**FROM: Date / Time (1st Choice)**  
**TO: Date / Time (2nd Choice)**

**Crew Members**  
**VCAT Certified?**

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**Please note that only VCAT Certified Members may use VCAT Equipment.**

### EQUIPMENT REQUIREMENT

Please note that this form is not intended for use as an Equipment Reservation Form. Certification may be required for some equipment.

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**Are you going to create your own set?**

**If yes, how much time will you need to build and strike your set?**

Please note that time required to decorate or build your set must be allotted into your studio time requested above.

**How many people will be involved with your shoot?**  
**Will your shoot include guests?**

I understand that

- [ ] I will be solely responsible for all activities that occur within the VCAT studio during this shoot.
- [ ] I am responsible for all and any guests who attend this production.
- [ ] All guests must sign in and wear a VCAT name badge.
- [ ] The studio must be left in the same configuration in which it was found.

Printed Name

[ ] Printed Name

Signature

[ ] Printed Name

Date

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