

## TECHNICAL REQUIREMENT FORM

PLEASE COMPLETE AND RETURN THIS FORM **AT LEAST 4 WEEKS** PRIOR TO BOOKING

Hirer: \_\_\_\_\_

Name of Event/Performance: \_\_\_\_\_

Venue Hired: (Please Circle)                      Theatre                      Macquarie Auditorium

### **Technical Contact Information:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### **Technical Terms and Conditions**

Unless previously organised with the Centre Manager, all users of the venues are obliged to be under the direction of the Technical and Production Coordinator and comply with the House Rules of the venue. It is the Technical and Production Coordinator's role (or delegate) to be responsible for:

- The safety of all users of the venue
- The installation of productions
- The management of productions
- The restoration of the stage and theatre at the conclusion of the production

It is a condition of hire that additional professional staff be organised through the Technical and Production Coordinator.

Amateur/non-professional/unpaid staff that have satisfied the Technical and Production Coordinator (or delegate) as to their competence relating to the task/s they are undertaking may be approved to work on stage or operate equipment.

Each performance on stage must be under the control and direction of a competent Stage Manager. The Hirer may provide the Stage Manager, however the Centre Manager reserves the right to ensure that adequate Stage management is provided. If the hirer does not supply a Stage Manager and in the opinion of the Technical and Production Coordinator, one is required, the Centre reserves the right to roster a suitable Stage Manager at the Hirer's expense.

#### **PLEASE NOTE**

- **A DRTCC Venue Technician is mandatory at all times when the Centre is occupied and has the authority to act as the Manager's representative and enforce all conditions of hire.**
- **All Technicians are required to have a 30-minute meal break after every 5 hours.**
- **Bump Out is to commence immediately after the last performance and to be completed as soon as possible. The Theatre is in high demand and therefore needs to be available by 6am the next day for the next Hirer.**

Signed for Hirer: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

**All changes to requirements will only be negotiated via the Technical contact person whose name appears above.**

## REHEARSAL/PERFORMANCE SCHEDULE

Bump In/Set-up Date(s): \_\_\_\_\_ Access Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

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Rehearsal Date 1: \_\_\_\_\_ Access time required: \_\_\_\_\_ Start time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

Rehearsal Date 2: \_\_\_\_\_ Access time required: \_\_\_\_\_ Start time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

Rehearsal Date 3: \_\_\_\_\_ Access time required: \_\_\_\_\_ Start time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

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Performance Date 1: \_\_\_\_\_ Access time required: \_\_\_\_\_ Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_

Performance Date 2: \_\_\_\_\_ Access time required: \_\_\_\_\_ Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_

Performance Date 3: \_\_\_\_\_ Access time required: \_\_\_\_\_ Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_

Performance Date 4: \_\_\_\_\_ Access time required: \_\_\_\_\_ Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_

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Bump Out Date: \_\_\_\_\_ Finish time: \_\_\_\_\_

**Please attach separate rehearsal/performance schedule if space insufficient.**

### TECHNICAL STAFF REQUIREMENTS

**Note: A Venue Technician is a mandatory requirement for all hirers. This Technician will normally assume the role of Audio or Lighting operator, or Fly Operator/Stage Manager.**

**Depending on specific technical requirements & operator workload some shows may require additional operators. Please consult with the Venue Technician.**

**Counterweight Fly System is to be operated by DRTCC staff or suitably authorised personnel only.**

Staff Requirements:	Venue Technician (Mandatory)		
Audio Operator	Number _____	Fly Operator	Number _____
Lighting Operator	Number _____	Stage Hand	Number _____
Stage Manager	Number _____	Followspot Operator	Number _____
Mech/Flyman (Bump In/Out)	Number _____	LX (Bump In/Out)	Number _____

Others: (please specify)

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**Please attach separate/additional staff schedule if necessary**

## STAGING & GENERAL TECHNICAL REQUIREMENTS

**N.B. All technical requirements should be discussed with the Technical and Production Coordinator preferably at the time of booking the venue, but no later than 4 weeks prior to the first performance or event.**

No. Of Cast: \_\_\_\_\_ Crew: \_\_\_\_\_

Number of Dressing Rooms Required: \_\_\_\_\_

**Piano:** Yamaha Grand (Charges apply)  
Tuning Required (Charges apply)

Music Stands with Lights: Quantity: \_\_\_\_\_ (20 max)

Orchestra Pit: Number in pit: \_\_\_\_\_

Chairs: Quantity: \_\_\_\_\_ Location: \_\_\_\_\_

Lectern: YES / NO

**Theatre Talkback/Headset Communication System:** No. Headsets Required: \_\_\_\_\_

Headset Positions: \_\_\_\_\_

Do you intend using Pyrotechnics (i.e. flash pots, glitter bombs, firearms, lighted flames etc)? YES / NO  
If so please give details:

\_\_\_\_\_

### **Venue Counterweight Flying System:**

Note: To be operated by DRTCC Staff or personnel authorised by the Technical & Production Co-ordinator or Venue Technician only.

Standard Masking (House Curtain, ½ stage Black, White Cyclorama, Rear stage Black, Legs & Borders masking)

Please supply hanging plot or details of equipment/scenery/backdrops to be flown (fire retardant):

\_\_\_\_\_

### **Please attach separate/additional details regarding Staging if necessary**

**STAGING CONTACT INFORMATION:** Please supply name and contact details for your Stage/Tour Manager or Contractor

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_



## **LIGHTING REQUIREMENTS**

Do you wish to use the venue's Standard Lighting Rig?      YES / NO  
(Contact Technical and Production Coordinator for details of Standard Rig)

Do you require Follow Spot(s)?      YES / NO (Hirer supplied operators will need to display competency)

Do you require a Hazer ?      YES / NO      Do you require a Smoke Machine?      YES / NO  
(Charges apply)      (Charges apply)

Will you supply a Lighting Design and/or Hanging Plot?      YES / NO

Will you supply any Lighting Equipment?      YES / NO

Details:

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Please attach separate/additional lighting requirements if necessary.

**LIGHTING CONTACT INFORMATION:** Please supply name and contact details for your Lighting Designer/Tech

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

## **AUDIO VISUAL REQUIREMENTS**

Do you wish to use the Venue's Data Projector and Projection Screen ?      YES / NO  
(Charges apply)

Playback Format: Laptop PC / DVD / Other: \_\_\_\_\_

Will you be filming, videotaping or televising any performance or rehearsal?      YES / NO  
[Video recording is only allowed from Bio Box unless authorised by the Manager or the Manager's delegate.]

Do you require an Audio Feed from sound desk?      YES / NO

**VIDEO PRODUCTION CONTACT INFORMATION:** Please supply name and contact details for AV Tech or Video Production Company.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

## AUDIO REQUIREMENTS

Will you be using standard DRTCC Audio System?                      YES / NO (See equipment list)

Will you be supplying your own Audio System?                      YES / NO

Details:

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**Foldback/Stage Monitor Sends Required:**                      Quantity: \_\_\_\_\_

Locations: \_\_\_\_\_

**Please attach Stage Audio Plan/Layout if available.**

Do you require?

Wireless Handheld Microphones                      Quantity: \_\_\_\_\_ (Additional Charge \$25 each per day)

Wireless Bodypack Microphones                      Quantity: \_\_\_\_\_ (Additional Charge \$25 each per day)

Wired Microphones                      Quantity: \_\_\_\_\_

Lectern Microphone

Music/Sound Effects Playback                      Format: CD / Tape / Mini Disc / Hard Disk / Other: \_\_\_\_\_

Other (please specify): \_\_\_\_\_

**Please attach separate/additional details regarding audio requirements if necessary.**

**AUDIO CONTACT INFORMATION:** Please supply name & contact details of Audio Designer/Technician.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_