



## Conference Center Set Up Form

**Today's Date:** October 7, 2011

**Renting Organization Name:** The Media Consortium/Foundation National Progress

**Organization Contact Person:** Jo Ellen Green Kaiser

**Phone:** 415-878-3862

**Email:** joellen@themediaconsortium.com

**(Day of contact number) Cell:** 415-939-0823

**Presenter(s):** Erin Polgreen

**Phone:** 312-841-0553

**Email:** erin@themediaconsortium.com

**Meeting/Conference Date:** October 13 and October 14

**Confirmed Number of Attendees:** 85 over 2 days

**Reservation Time:** *(Include set up time and breakdown time)*

**Start:** 7:30 both days **End:** 9pm Oct 13, 5pm Oct 14

**Caterer Arrival Time:**

**Start:** 8:00 both days **End:** 1:00 both days

**Meeting Duration:**

**Start:** 8:30 both days **End:** 8:30 Oct 13, 4:30 Oct 14

**Rooms Requested:** ☒ **Plaza A** ☒ **Diablo Room** ☐ **Bay Room**

**Plaza A set up:**

           **Theatre**   x   **Class Room**            **U-Shape**            **Board Room**

**Plaza A (AV) needs** *(indicate by placing a check mark):*

           Conference/Speaker Phone

  x   LCD Projector with computer & internet access

           LCD Projector with VCR/DVD access

  4   How many microphones: ☒ **Wireless** ☐ **Lapel**

  3   Numbers of Flip Chart stands requested (up to 3) markers are provided. Must provide your **own Flip Chart Paper**. *(This can be purchased at an additional cost).*

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*This portion to be completed by the Facilities Manager*