

Clonick Self-Serve Recording Request

STUDENT NAME _____	Today's Date ____/____/____
STUDENT EMAIL _____@oberlin.edu	PHONE _____
CLONICK HALL POLICIES: <ul style="list-style-type: none">• TWO HOURS of hall time may be reserved per form.• Maximum of one form may be submitted per day.• May be reserved for 24 hours – 2 weeks in advance.• Maximum of 3 bookings may be held at once, maximum 2 hrs per day. By signing this form I agree to the following: <ol style="list-style-type: none">1. I have completed a training session with Con Audio.2. When done, I will return the studio to its original condition.3. I will be held responsible for the condition of the studio and equipment throughout my reservation period.4. I will not bring food or drink into the studio.5. Failure to adhere to the policies may result in a fine and/or loss of recording privileges in Clonick. <ul style="list-style-type: none">• If there is a problem with the recording equipment, immediately contact Con Audio at (440) 775 8272.	Requested Date ____/____/____ <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sa <input type="checkbox"/> Su Time: _____ am/pm to _____ am/pm Office use: <input type="checkbox"/> EMS <input type="checkbox"/> persona <input type="checkbox"/> Cal <input type="checkbox"/> Email conf
STUDENT SIGNATURE _____ <i>Please put piano covers on another piano, not on the floor. Clonick Hall is reserved for recording only, not for rehearsals.</i>	OBERLIN <hr/> COLLEGE & CONSERVATORY

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