

Revised April 2020

New Hope Las Vegas Christian Fellowship

***Speaker’s Needs Request Form***

**Please email the completed form to austin@newhopelasvegas.com, seth@newhopelasvegas.com, kortnee@newhopelasvegas.com and newhopelvstage@aol.com, rochelle@newhopelasvegas.com at least 5 DAYS PRIOR to your message.**

## Name of Speaker: Date Submitted:

##

## Email: Date of Message:

⬜ Sunday Services ⬜ Wednesday Service *or*  ⬜BOTH Services

Message Title:

## Music Needed For Message? Yes ⬜ No ⬜

## If using music during the message, email an Mp3 of song/submit a CD to Powerpoint Team 5 days prior

## Graphics Needed For Message? Yes ⬜ No ⬜ (Please attach any graphic jpg files)

##

## Video Clip Needed For Message? Yes ⬜ No ⬜ (Please provide a youtube video link)

Web Link For Video:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Edit the Video For Message? Yes ⬜ No ⬜ (Indicate your specific needs with AV team)

## Check Copyright Infringements For Video? Yes ⬜ No ⬜

## **Description of Music/Graphics/Video Being Used: (Please note when you will be needing these elements in your message: Eg. After Point #1, before a particular scripture, etc.).**

## **Also, if using a video, please provide a detailed description of the scenes you want the video to be played by indicating the time on the video and the duration of how long you want the video to be played.** Please include your message notes when emailing this form to the team. This is due 5 days before your message is being shared.

## Create a Graphic For Message? Yes ⬜ No ⬜(Please describe in detail above)

## Create a Video For Message? Yes ⬜ No ⬜

  **\*2-3 weeks is needed to create a video for your message, depending on the availability of the media team. Please complete the Video Production Request Form located on website (Servant’s Corner).**

##

**EXTRA Equipment Needs**

**PROPS NEEDED:** 🞎 Yes 🞎No – If Yes, please list out: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Microphone**: 🞎 Yes 🞎 No - If Yes how many \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LAV Microphone**: 🞎 Yes 🞎No – If Yes how many \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Special Lighting:** 🞎 Yes 🞎No – If Yes, please attach a separate sheet with details

Reviewed By: Date: