

# CALISTHENICS VICTORIA INC.



Calisthenics Victoria Inc.

## LIGHTING SHEET

Name Club/College \_\_\_\_\_

Competitor/Item No. \_\_\_\_\_

Contact Name (print) \_\_\_\_\_

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

Section (i.e. SubJnrs.) \_\_\_\_\_ Item. \_\_\_\_\_  
(ie Song)

Title of Item \_\_\_\_\_  
(ie Farmyard Frolics)

Date of Item \_\_\_\_\_

Tick any of the following you will require

DATA PROJECTION

SMOKE

UV LIGHTS

FOLLOW SPOT

CUE	TIME	DESCRIPTION	ACTION
PRESET			
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

### PLEASE NOTE:

- A separate sheet must be completed for each competitor in each section.
- Spotlights must be referred to by number (1 – 9)
- Lighting cue sheet must be completed and handed to supervisor when booking in at **CVI** only.
- When calling your cues please first say 'STANDBY CUE NUMBER' approximately 15 seconds before the cue is due to occur. When you want the cue to be activated say 'CUE NUMBER...GO'.

LIGHTING SHEET WILL ONLY BE ACCEPTED IF TYPED