**LIGHTING CUES**

Company/Team Name:

Brief Description of Garment:

Song Submission: ☐ Yes ☐ No

Name of Song:

Black Out: ☐ Yes ☐ No

If so, When?

Choice of Lighting color in the room:

Choice of Lighting effect: ☐ Beam ☐ Strobe

Choice of color of Lighting effect:

Additional Comments: