



Schaffer Sound Productions • 843 N. Providence Road  
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# Musical Request Sheet

NOTE: In order to customize your event and ensure satisfaction, please complete this form and return it to our office 1 month prior to your schedule date.  
(Please type or print clearly)

Date of Event:		
Month	Day	Year

Name:

Type of Event:

1. Cocktail/Dinner Preferences: (Please list your favorite artists, titles and styles)		
1. _____	5. _____	9. _____
2. _____	6. _____	10. _____
3. _____	7. _____	11. _____
4. _____	8. _____	12. _____

2. Open Dance Segment: (Check Preferences Below)		
<input type="checkbox"/> 1940's Swing / Big Band	<input type="checkbox"/> Adult Contemporary	<input type="checkbox"/> 1950's
<input type="checkbox"/> 1960's / Motown	<input type="checkbox"/> 1970's Dance / Disco	<input type="checkbox"/> 1980's/90's Dance / Club
<input type="checkbox"/> Party Rock / Rock & Roll	<input type="checkbox"/> Top 40	<input type="checkbox"/> Alternative
<input type="checkbox"/> Country	<input type="checkbox"/> Ethnic (specify) _____	<input type="checkbox"/> Other _____

Must Play List!
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Secondary List*
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Music <u>NOT</u> to be played!
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

\* Note: The SECONDARY LIST is for songs you would like to hear if the DJ can fit them in, but you do not feel they are songs that must be played.