

Michigan NATOA Pro Membership Information

Facility Name: _____
Address: _____ City/State/Zip _____
Main Phone: (____) _____ FAX (____) _____
Facility Website: _____
Executive Director/GM: _____

Profile:

Full Time Staff _____ # Part-Time Staff _____ # Active Volunteers _____ # Paid Contractors _____ #
Interns _____

List Names of Communities Served: _____

Operating Budget Range: _____

Cable Company: _____ Main Phone # _____

Playback Format Accepted: (check all that Apply)

VHS _____ S-VHS _____ MiniDV _____ DVCAM _____ DVC Pro _____ 3/4" _____ Beta _____

DVD _____ Other: (please List) _____

Playback Preferred Master Format: _____

Playback Format: Server Based _____ Tape Based _____ Other _____

Playback Equipment Description: (Brands/Models, etc): _____

Channel Information: (if you have multiple channels, please list info per channel)

Channel Name/ # _____ PEG Type: _____ Avg. #of orig programming hrs/wk _____

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Post- Production

Computer Format: PC _____ MAC _____ Operating System: _____

Graphics Software (list all used or available in facility): _____

2D Animation Software: _____

3D Animation Software: _____

Non-Linear Edit Software: _____

Linear Capabilities?: Yes _____ No _____

Production (under description please include make & model of the equipment currently being used at your facility)

Studio(s)

Do you have a studio? Yes _____ No _____ If yes, approximate size _____

Studio Lights: Description: _____ Number of lights: _____

How many camera's for your studio? _____ Description: _____

Tripods Description: _____

Studio CG description: _____

Audio Capabilities and Description: _____

Switcher Description: _____ # of inputs: _____

List sources for switcher: _____

Master Record Deck: VHS _____ S-VHS _____ MiniDV _____ DVCAM _____ DVC Pro _____ 3/4" _____

Beta _____ DVD _____ Deck make/model _____

Teleprompter: yes _____ No _____ if yes, make/model & software _____

Please list other equipment and/or describe additional information about your studio (s): _____

ENG/Field Equipment

Do you have remote cameras? Yes: _____ No _____ If yes, please list how many and describe: _____

Are the available to the public to use? Yes: _____ No _____

of remote tripods _____ Make/Model _____

Portable Field Monitor & Quantity? Yes _____ No _____ Description: _____

Light Kit Available: Yes _____ No _____ Description: _____

Audio Type and Quantity: Wireless Lav _____ Wireless Handheld: _____

Lavalieres _____ Handheld: _____

Boom Mic _____ Other _____

Please list other equipment and/or describe additional information about your remote gear: _____

Production Truck/Van

How many camera's for your truck? _____ Description: _____

Tripods Description: _____

Truck CG description: _____

Audio Capabilities and Description: _____

Switcher Description: _____ # of inputs: _____

List sources for switcher: _____

Master Record Deck: VHS _____ S-VHS _____ MiniDV _____ DVCAM _____ DVC Pro _____ 3/4" _____

Beta _____ DVD _____ Deck make/model _____

Generator _____ Plug In _____ Other _____

Please list other equipment and/or describe additional information about your truck: _____

Misc

Average # of Studio shoots per year _____

Average # of Remote/ENG shoots per year _____

Average # of Truck/Van shoots per year _____

Other: _____

Please List any other information or equipment that others might like to know or would be useful: _____

Person filling out form: _____

Title: _____ Date: _____