

Please contact me for free advice.

Company _____

Name _____

Address _____

Phone _____

Email _____

Fax _____

PLEASE SEND PER FAX TO

**SHURE DISTRIBUTION UK
01992-7030-57**

Please note: Information on this form will only be used to contact you. This data will not be passed to other parties.

Yes, please contact me. Signature: _____

CHECKLIST BARS & CLUBS



Are microphones required?	For:	Speech	Vocals
Will the installation be used for		background music only	or will there also be live acts?
How many input devices (e.g. computers, CD-players) have to be connected?			
Is a jukebox function for in/out devices required?		Yes	No
How large is/are the room(s)?			
How many different rooms need to be considered?			
Ceiling speakers or surface mount speakers?			
Is there an existing cable network that can be utilised?		Yes	No

Comments: _____