



# ROAR NETWORK VIDEO SERVICES

## Request for Proposal to Film Your Event *SCRIPTED/PROMOTIONAL PRODUCTION*

Daum Hall Annex, Loyola Marymount University

PHONE: 310.338.5124 FAX: 310.338.1694

Please submit all requests at least two weeks in advance.

### Contact Information

Organization:	
Contact Person:	
Phone Number:	
Email Address:	

### Pre-Production/Production Information

Describe the concept of your video(s)	
Describe the style of your video(s)	
How many separate videos would you like to order?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8
What is the ideal length of each video?	<input type="checkbox"/> Less than 15 sec <input type="checkbox"/> 15 – 30 sec <input type="checkbox"/> 30 – 60 sec <input type="checkbox"/> 1 – 1.5 min <input type="checkbox"/> 1.5 – 2.5 min <input type="checkbox"/> 2.5 – 5 min <input type="checkbox"/> 5 – 8 min <input type="checkbox"/> 8 – 12 min <input type="checkbox"/> 12 min or more
Is your project scripted? If so, who is writing/has written the script?	<input type="checkbox"/> Yes <input type="checkbox"/> No Writer's Name _____
Would you need any assistance in writing a script?*	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you anticipate needing to use LMU actors?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you anticipate needing actors from outside of LMU?	<input type="checkbox"/> Yes <input type="checkbox"/> No

*\*Please note that we highly recommend script assistance. Whether you need help fully developing your ideas or need assistance with script formatting, our team of writers is more than happy to work with you from step one.*

<p><b>Where do you expect the filming to take place? (Check all that apply)</b></p>	<p><input type="checkbox"/> ROAR Studio    <input type="checkbox"/> Green screen  <input type="checkbox"/> On location                  If on location, explain where:                  _____</p>
<p><b>Do you plan on using a teleprompter?*</b></p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p><b>How many individual shoots do you anticipate will be needed?***</b></p>	<p><input type="checkbox"/> 1    <input type="checkbox"/> 2    <input type="checkbox"/> 3    <input type="checkbox"/> 4    <input type="checkbox"/> 5+</p>

\*\*\*PLEASE NOTE: We can advise you in an in-person meeting on what we recommend

**Final Product Details/Shoot Information**

<p><b>How would you like the final product delivered? (check all that apply)</b></p>	<p><input type="checkbox"/> DVD(s)**    <input type="checkbox"/> Downloaded via Email  <input type="checkbox"/> YouTube    <input type="checkbox"/> Flash Drive    <input type="checkbox"/> Other</p>
<p><b>Would you like any graphics added? If so, what type of graphic(s)?**</b></p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No                  type of graphic(s): _____</p>
<p><b>Would you like subtitles added?*</b></p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p><b>Would you like a voiceover added?*</b></p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>

\*\*PLEASE NOTE: Additional charges may apply.

By signing below, you acknowledge the following:

I agree that I give permission to ROAR Network to record the above event and rights to broadcast material unless stated otherwise. This document will be used by ROAR Network to develop a cost estimate and a proposal for shooting your event, and is not a contract.

**Printed Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Date Received:** \_\_\_\_\_

**Office Use Only**

**Business Manager's Signature:** \_\_\_\_\_

**Assigned to (videographer):** \_\_\_\_\_

**Assigned to (editor):** \_\_\_\_\_