

Tuscany Soundz – Live Recording

Check List Gig/Venue:

Contact name:	
Contact phone number:	
Contact Email:	
Day/Date:	
1 st band:	
2 nd band:	
3 rd band:	
Venue opens:	
Set-Up time 1 st band:	
Set-Up time 2 nd band:	
Set-Up time 3 rd band:	
Soundcheck 1 st band:	
Soundcheck 2 nd band:	
Soundcheck 3 rd band:	
Performance Start 1 st band:	
Performance Start 2 nd band:	
Performance Start 3 rd band:	
PA in venue (Yes/No):	