

ROLLED AWAY PRODUCTIONS brainstorm and request form

PROJECT NAME: _____

What do you envision your video looking like: _____

What do you hope to achieve through the video: _____

Where will the video be placed: _____

What type of overall feel or mood do you want the video to have/convey: _____

Where will video be shot: _____

Has proper permission been given to shoot at that location. _____

Will music be necessary in the video: Y / N If so, where and what type/style/instrumentation/tempo:

Do you want an intro to your video: Y / N If so, what will it look like (company logo, title, quick clips, etc....)

Which "body of video" selection best achieves your overall goal of the video: A / B / C

How so: _____

Who will be in video: Person	_____	Release	_____	
	Person	_____	Release	_____
	Person	_____	Release	_____
	Person	_____	Release	_____
	Person	_____	Release	_____

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Do you want a closing title page: Y / N, If so please list information for the page: (Business name, address, contact information, website information etc)

Will any special equipment be required to shoot the video: Y / N, If so, what: _____

Do you want a hard copy of the video: Y / N, If so, what format: _____

Client Signature: _____ Date: _____

SCHEDULED SHOOT DATE: _____ TIME: _____