FREQUENCY REQUEST FORM

ALL WIRELESS TRANSMITTERS MUST BE COORDINATED AND APPROVED FOR USE

Name of Organization	
Supervising Manager	
Client/Supervisor's Email *	
Onsite User *	
Onsite User's Email *	
Event Day Phone Number *	
First Date of Use *	
Last Date of Use *	



EQUIPMENT INFORMATION						
	Device 1	Device 2	Device 3	Device 4		
Manufacturer						
Model						
Frequency Range / Block						
Output Power (if known)						
Analog or Digital						

SCHEDULE					
Usage	Request 1	Request 2	Request 3	Request	
(Circle the required times)	Media Day	Media Day	Media Day	Media Day	
	Playoff Playlist Live	Playoff Playlist Live	Playoff Playlist Live	Playoff Playlist Live	
	Pre-Game	Pre-Game	Pre-Game	Pre-Game	
	Halftime	Halftime	Halftime	Halftime	
	During Game	During Game	During Game	During Game	
	Postgame	Postgame	Postgame	Postgame	

NOTES, COMMENTS, and ADDITION INFORMATION						

On-Site Coordinator:PhoneEmail:Otto Schellin412-287-1328rf@collegefootballplayoff.com

PLEASE NOTE: THE COLLEGE FOOTBALL PLAYOFF EXPRESSLY PROHIBITS THE USE OF ANY NON-REGISTERED DEVICES THAT IS CAPABLE OF BROADCASTING AN RF SIGNAL IN ANY RANGE INCLUDING 2.4GHz AND 5GHz WIFI BANDS.