Yale College Dean's Office
Office of Undergraduate Production
Staged Combat/Weapons Request

Please read the OUP Staged Combat and Weapons Policy before filling out this form.
Production:
Applicant name, e-mail, phone:
Applicant position on production staff:

Request for use of Staged Combat

Description of the proposed use of staged combat in the production (please include style, frequency, # of actors involved, and any other known details):

OUP: Approved? Y N Professional Fight Director Required? Y N Date

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Request for Weapon Use

and type of no-contact weapons desired:
Proposed source, if known:

and type of weapons desired for weapon-to-weapon contact:
Proposed source, if known:

Dates that prop weapons will be used in rehearsals:
Location of rehearsals:
Person who will transport prop weapons to/from rehearsal space:
Location where prop weapons will be stored between rehearsals:

Dates that prop weapons will be used in performances:
Location of performances:
Person who will transport prop weapons to/from performance space:
Location where prop weapons will be stored between performances:

OUP: Approved? Y N Date

OUP: Chain of Custody of the props weapons: **LOCK CODE:** _____

Recvd. by:	_____	_____	_____	_____
	(Print name)	(Signature)	(Phone)	(Date)
Recvd. by:	_____	_____	_____	_____
	(Print name)	(Signature)	(Phone)	(Date)
Recvd. by:	_____	_____	_____	_____
	(Print name)	(Signature)	(Phone)	(Date)