



# 8-Count Sheet

Today's Date:

Program Name:   
Mix Type:   
Order# or Email:

Team Name:   
Mix Length:   
Mix Speed (BPM):

Use the 1st line of the 8-count sheet to indicate what count you would like the MIX to start on. Describe the routine below.

Section	1	2	3	4	5	6	7	8
1 Music Starts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								

	Section	1	2	3	4	5	6	7	8
24									
25									
26									
27									
28									
29									
30									
31									
32									
33									
34									
35									
36									
37									
38									
39									
40									
41									
42									
43									
44									
45									
46									
47									
48									
49									
50									



## Song Request Information

If you or your team have any song requests, please provide the information for each song in the boxes below. Song requests are optional and not required. **Columns with an astrick (\*) are required.**

	<b>Song Title*</b>	<b>Artist/Album/Version</b>	<b>Licensed Music Source*</b>	<b>Portion of Song (ex. 1:30-1:42)</b>	<b>Routine Section</b>
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

### Notes for Producer

If you have any additional notes or requests that can help us make your custom mix more personalized to your team, routine, or style, please provide them in the box below.