

2018-2019 SEASON REQUEST FORM



SECTION 1 - PERFORMANCE SELECTION *Please complete all 4 sections*

PERFORMANCE	SUGGESTED GRADE LEVEL	DATE	TIME (Circle One)		GRADE ATTENDING	# OF STUDENTS (Paid Tickets)	# FREE ADULT TICKETS (1 free w/ 10 students)	TOTAL SEATS REQUESTED (students + adults)	# PAID TICKETS		TICKET PRICE		TOTAL DUE
SAMPLE	--	--	10am	12:30pm	4, 5, 6	150	15	165	150	X	\$8	=	\$ 1,200
Rainbow Fish	PreK-2nd	10/15/18	10am							X	\$9	=	\$
The Crucible	7th-12th	11/5/18	9:30am							X	\$8	=	\$
Charlotte's Web	K-5th	12/5/18	10am	12:30pm						X	\$8	=	\$
A Christmas Carol	2nd-7th	12/14/18	10am	12:30pm						X	\$8	=	\$
The Very Hungry Caterpillar and other E. Carle Favorites	PreK-2nd	1/7/19	10am							X	\$9	=	\$
Freedom Train	3rd-8th	1/18/19	10am	12:30pm						X	\$8	=	\$
iLuminate	3rd-12th	2/7/19	10am							X	\$10	=	\$
Danny Carmo's Mathematical Mysteries	3rd-6th	2/13/19	10am	12:30pm						X	\$9	=	\$
Winston Churchill: The Blitz	7th-12th	3/1/19	9:30am							X	\$9	=	\$
Rosie Revere, Engineer	K-4th	3/14/19	10am	12:30pm						X	\$8	=	\$
Animal Farm	7th-12th	3/21/19	9:30am							X	\$8	=	\$
Number the Stars	4th-8th	4/2/19	10am	12:30pm						X	\$8	=	\$
Ballet Hispanico	3rd-12th	4/12/19	10am							X	\$10	=	\$
In to America	5th-10th	4/29/19	9:30am							X	\$9	=	\$
Magic Treehouse: Showtime with Shakespeare	K-5th	5/28/19	10am	12:30pm						X	\$8	=	\$
The Magic School Bus: Lost in the Solar System	K-5th	6/5/19	10am	12:30pm						X	\$8	=	\$

SECTION 2 - PATRON INFORMATION

SCHOOL NAME _____

SCHOOL REPRESENTATIVE/CONTACT PERSON (REQUIRED) _____

EMAIL ADDRESS (REQUIRED) _____

CLASSROOM TEACHER(S) _____

SCHOOL STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

SCHOOL PHONE # _____ EXT # _____ EVENING/WEEKEND PHONE # (REQUIRED) _____

Does anyone in your group have special seating needs? (Wheelchair, Sight, etc.) YES NO

Please explain: _____

SECTION 3 - PRINCIPAL SIGNATURE (REQUIRED)

IMPORTANT I understand the Zeiterion's Theatre's cancellation policy and that if payment is not received by the Zeiterion 30 DAYS PRIOR to performance date, the seats I have requested may be released for sale to other groups.

SCHOOL PRINCIPAL SIGNATURE (REQUIRED) _____

SCHOOL PRINCIPAL NAME (please print) _____

SCHOOL PRINCIPAL EMAIL ADDRESS _____

The Z is committed to protecting the privacy and safety of all students. On occasion, The Z may use a photographer to capture the excitement of the Schooltime shows for publication including but not limited to print and electronic publications. If you are aware of any students that cannot have their picture taken, please contact The Z's education staff at 508-997-5664.

SECTION 4 - PAYMENT (REQUIRED)

MY SCHOOL PLANS TO PAY WITH: CHECK PURCHASE ORDER BILL MY: VISA MASTERCARD DISCOVER

CREDIT CARD # _____ EXP DATE _____

NAME ON CARD _____

SIGNATURE _____

AMOUNT _____

Fax this form to: 508-999-5956 or mail to: Zeiterion Theatre, 684 Purchase St. New Bedford, MA 02740. Order online at www.zeiterion.org/schoolttime-series.