

# 2017-18 SCHOOL ORDER FORM

## STEP 1: CIRCLE YOUR SHOWS

PETER PAN JR.      CINDERELLA      MADAGASCAR: A MUSICAL ADVENTURE      MARY POPPINS

## STEP 2: CIRCLE YOUR DATES & TIMES

PETER PAN JR.			CINDERELLA			MADAGASCAR: A MUSICAL ADVENTURE			MARY POPPINS		
TUES, OCT. 24	9:45am	12:15pm	TUES, DEC. 12	9:45am	12:15pm	TUES, FEB. 13	9:45am	12:15pm	TUES, APR. 10	9:45am	12:15pm
WED, OCT. 25	9:45am	12:15pm	WED, DEC. 13	9:45am	12:15pm	WED, FEB. 14	9:45am	12:15pm	WED, APR. 11	9:45am	12:15pm
THUR, OCT. 26	9:45am	12:15pm	THUR, DEC. 14	9:45am	12:15pm	THUR, FEB. 15	9:45am	12:15pm	THUR, APR. 12	9:45am	12:15pm
FRI, OCT. 27	9:45am	12:15pm	FRI, DEC. 15	9:45am	12:15pm	FRI, FEB. 16	9:45am	12:15pm	FRI, APR. 13	9:45am	12:15pm
MON, OCT. 30	9:45am*	12:15pm**	MON, DEC. 18	9:45am*	12:15pm**	MON, FEB. 19	9:45am*	12:15pm**	MON, APR. 16	9:45am*	12:15pm**

\*Sensory-Friendly performances.      \*\*Designated Homeschool student and signed performances.

## STEP 3: CIRCLE YOUR PRICE

4-SHOW SERIES \$20	3-SHOW SERIES \$15	2-SHOW SERIES \$14	INDIVIDUAL TICKETS \$7
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QUESTIONS? Call 513.569.8080 x13 or email pam.young@tctcincinnati.com

## STEP 4: COMPLETE YOUR ORDER

Number of Students _____	X	PRICE \$ _____	=	SUBTOTAL \$ _____
Number of Free Chaperones (YOU RECEIVE ONE FREE CHAPERONE FOR EVERY 15 STUDENTS.) _____	X	\$ 0.00	=	\$ 0.00
Number of Paid Chaperones (INDICATE NUMBER OF PAID CHAPERONE : X APPLICABLE TICKET PRICE.) _____	X	\$ _____	=	\$ _____
<b>TOTAL</b>				<b>= \$ _____</b>

FOR OFFICE  
USE ONLY

SCHOOL NAME \_\_\_\_\_

TEACHER NAME \_\_\_\_\_ GRADE LEVEL \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SCHOOL PHONE \_\_\_\_\_ EXT \_\_\_\_\_

DISTRICT \_\_\_\_\_

EMAIL \_\_\_\_\_

PAYMENT CONTACT NAME \_\_\_\_\_

PAYMENT CONTACT PHONE \_\_\_\_\_

PAYMENT CONTACT EMAIL \_\_\_\_\_

PO NUMBER \_\_\_\_\_

Purchase Order must accompany order if required by your school district.

Complete order form and email to  
pam.young@tctcincinnati.com or call  
513.569.8080 x13.

**Please mail check, money order or PO to:**  
The Children's Theatre of Cincinnati  
Attn: School Orders 17-18  
4015 Red Bank Road, Cincinnati, Ohio 45227

Please indicate the number of accessible  
seats in your order:

\_\_\_\_\_ Seating is limited and cannot  
be guaranteed unless reserved.

Please indicate the number of students  
with hearing impairment in your order:

\_\_\_\_\_ Signed performances are  
Mondays at 12:15pm.

Please indicate the number of children  
under three in your order:

\_\_\_\_\_ Homeschool performances are  
Mondays at 12:15pm.

For questions or for information about our Sensory-Friendly performances email  
pam.young@tctcincinnati.com or call 513-569-8080 x13.