



2010-11 STUDENT MATINEE RESERVATION FORM

Organization Name _____

Organization Address _____

Organization City _____ State _____ Zip _____

School District / County _____ Phone _____

Fax _____ Email _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone (day) _____ Phone (eve) _____

Email _____

How did you hear about us? _____

2009-10 BOOK-IT ALL OVER! STUDENT MATINEES (Circle a date) _____

____ RED RANGER CAME CALLING (Grades K – 6) 10:30 a.m., Dec 1, 8

____ GREAT EXPECTATIONS (Grades 7 – 12) 10:30 a.m., Feb 15, 16, Mar 1

____ PRAIRIE NOCTURNE (Grades 9 – 12) 10:30 a.m., Mar 23

I would like more information about an in-class pre-show or post-show workshop for my students

Number of students _____

Grade _____

Number of chaperones (1 free chaperone per 10 students) _____

Total number of seats _____

Total cost (number of students x \$10 per ticket) _____

Yes, I would love to support Book-It Repertory Theatre with my **tax-deductible donation!** _____

TOTAL _____

How will students arrive? _____ Bus _____ Metro bus _____ Private car _____ Other _____

PRINT OUT THIS FORM AND MAIL OR FAX TO:

BOOK-IT ALL OVER * 305 Harrison Street, Seattle, WA 98109 * Ph: 206.770.0880 * Fx: 206.256.9666

www.book-it.org * education@book-it.org