

# 2011-2012 SCHOOL ORDER FORM

## STEP 1: CIRCLE YOUR SHOWS

THE WIZARD OF OZ HOLIDAY FOLLIES 2011

DISNEY'S

MY SON PINOCCHIO JR.

RAPUNZEL! RAPUNZEL!

## STEP 2: CIRCLE YOUR DATES & TIMES

### THE WIZARD OF OZ

Fri, Oct. 14 9:30am 12:00pm  
 Tues, Oct. 18 10:00am 12:30pm\*  
 Wed, Oct. 19 10:00am 12:30pm  
 Thur, Oct. 20 9:30am 12:00pm  
 Fri, Oct. 21 9:30am 12:00pm

### HOLIDAY FOLLIES 2011

Fri, Dec. 2 9:30am 12:00pm  
 Tues, Dec. 6 10:00am 12:30pm\*  
 Wed, Dec. 7 10:00am  
 Thur, Dec. 8 9:30am 12:00pm  
 Fri, Dec. 9 9:30am 12:00pm

### DISNEY'S MY SON PINOCCHIO JR.

Fri, Feb. 10 9:30am 12:00pm  
 Tues, Feb. 14 10:00am 12:30pm\*  
 Wed, Feb. 15 10:00am 12:30pm  
 Thur, Feb. 16 9:30am 12:00pm  
 Fri, Feb. 17 9:30am 12:00pm

### RAPUNZEL! RAPUNZEL!

Fri, Mar. 23 9:30am 12:00pm  
 Mon, Mar. 26 9:30am 12:00pm  
 Tues, Mar. 27 10:00am 12:30pm\*  
 Wed, Mar. 28 10:00am 12:30pm  
 Fri, Mar. 30 9:30am 12:00pm

\*Designated Homeschool student and signed performances. Children under three can only attend these performances.

## STEP 3: CIRCLE YOUR PRICE

4-SHOW SERIES	3-SHOW SERIES	2-SHOW SERIES	INDIVIDUAL TICKETS
\$20	\$15	\$14	\$7

QUESTIONS? Call 513.569.8080 ext. 13.

## STEP 4: COMPLETE YOUR ORDER

Number of Students		X	\$	_____	=	\$	_____	
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 CHAPERONES X APPLICABLE TICKET PRICE.)		X	\$	_____	=	\$	_____	
<b>TOTAL</b>						=	\$	_____

SCHOOL NAME \_\_\_\_\_ GRADE LEVEL \_\_\_\_\_  
 TEACHER NAME \_\_\_\_\_  
 SCHOOL ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 SCHOOL PHONE \_\_\_\_\_ EXT \_\_\_\_\_ FAX \_\_\_\_\_  
 DISTRICT \_\_\_\_\_ EMAIL \_\_\_\_\_  
 PAYMENT CONTACT NAME \_\_\_\_\_  
 PAYMENT CONTACT PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_  
 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Payment or Purchase Order must accompany order to ensure your reservation.**

Complete order form and fax to: **513.569.8084**

Please mail check, money order or PO to:

**The Children's Theatre**  
**Attn: School Orders 11-12**  
**5020 Oaklawn Drive**  
**Cincinnati, OH 45227-1434**

**Please indicate the number of special needs accessible seats in your order:**

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

Please indicate the number of hearing-impaired students in your order: \_\_\_\_\_.  
 Signed performances are on Tuesdays at 12:30.

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

**FOR OFFICE USE ONLY**

Call 513.569.8080 ext. 13 or visit [www.thechildrenstheatre.com](http://www.thechildrenstheatre.com)