

# ZEITERION THEATRE 2014-2015 SCHOOLTIME REQUEST FORM

**EARLY BIRD DISCOUNTS!** ORDER and PAY by:

**JULY 15** & receive a **10% DISCOUNT!**

**SEPTEMBER 4** & receive a **5% DISCOUNT!**

## Section 1 – Performance Selection Please complete all 4 sections

PERFORMANCE	SUGGESTED GRADE LEVEL	DATE	TIME		GRADE ATTENDING	TOTAL SEATS REQUESTED <small>students + adults</small>	# FREE ADULT TICKETS <small>1 free w/ 10 students</small>	# PAID TICKETS		TICKET PRICE	TOTAL DUE	PAYMENT DUE DATE
			CIRCLE ONE									
<b>SAMPLE</b>	--	--	10AM	12:30PM	4, 5, 6	156	15	141	X	\$8	= \$1,128	--
Anne Frank	5th-10th	10/29/14	10AM	12:30PM					X	\$9	= \$	
SkippyJon Jones	PreK-4th	11/17/14	10AM	12:30PM					X	\$8	= \$	
Toying with Science	2nd-6th	11/18/14	10AM						X	\$8	= \$	
A Christmas Carol	1st-7th	11/25/14	10AM	12:30PM					X	\$8	= \$	
We the People	4th-8th	12/2/14	10AM	12:30PM					X	\$8	= \$	
Miss Nelson	PreK-5th	1/29/15	10AM	12:30PM					X	\$8	= \$	
Freedom Bound	3rd-9th	2/3/15	10AM						X	\$9	= \$	
Flamenco Vivo	All Ages	2/9/15	9:30AM						X	\$8	= \$	
And Justice for All	8th-12th	2/26/15	9:30AM						X	\$10	= \$	
Incidents in the Life of a Slave Girl	7th-12th	3/11/15	9:30AM						X	\$12	= \$	
Incidents in the Life of a Slave Girl	7th-12th	3/12/15	9:30AM						X	\$12	= \$	
Hamlet	6th-12th	4/8/15	9:30AM						X	\$10	= \$	
Wiesenthal	7th-12th	4/16/15	9:30AM						X	\$10	= \$	
Flat Stanley	K-4th	5/5/15	10AM	12:30PM					X	\$8	= \$	
The Lightning Thief	2nd-6th	5/21/15	10AM	12:30PM					X	\$8	= \$	
The New American	4th-10th	5/27/15	10AM	12:30PM					X	\$9	= \$	
Black Violin	4th-12th	5/29/15	9:30AM						X	\$10	= \$	
Curious George	PreK-3rd	6/15/15	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 60 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 \_\_\_\_\_

## 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 \_\_\_\_\_

**To request your group's space, FAX THIS FORM TO: 508-999-5956 [www.zeiterion.org](http://www.zeiterion.org)**  
**OR MAIL TO:** Zeiterion Theatre, 684 Purchase St. New Bedford, MA 02740