

Schooltime Performance Series Reservation Request

Performance Name & Date: _____

Show time requested (first come basis): _____

School Name: _____

Teacher Name: _____ Grade level: _____

E-mail: _____

School Address: _____

School Website (if available): _____

School Phone: _____ Fax: _____

**Performance Cost: \$ 4.00 per student; teachers free
One free chaperone for every 10 students; otherwise, \$ 4.00 each**

Number of Students = _____ x \$ 4.00 = \$ _____

Number of Teachers (free) = _____

Number of Chaperones (1 free per 10 students) = _____

Number of paid Chaperones = _____ x \$ 4.00 = \$ _____

Total number of people attending = _____

Total ticket price = \$ _____

Please fax to: 731-986-0550 or mail to: The Dixie PAC, Attn: Schooltime Performance Series Reservations, PO Box 668, Huntingdon, 38344
Admission costs are due by date of performance.

**Confirmations will be mailed if your reservation is accepted.
You will be called or e-mailed if show is sold out.**