

# On Stage at the Center 16/17

## ORDER FORM ONE FORM FOR EACH PERFORMANCE (please copy if needed)

### PATRON INFORMATION

School Constituent ID (SCFTA use only)

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School District Grade Levels at School

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School Address TYPE OF SCHOOL  Public  Private  Charter  Home

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City Zip Code County

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School Phone ( ) Fax ( )

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Contact Person Position Constituent ID (SCFTA use only)

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Cell Phone ( ) E-mail Address

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Grade Levels Attending No. of Buses (Buses must arrive 30 minutes prior to performance)

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Special Seating Requirements

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The SCHOOL REPRESENTATIVE is responsible for notifying the Center's Education Department (by phone or e-mail) of any changes to the reservation before the payment deadline. Notice of changes or cancellation must be made **1 MONTH** before the scheduled performance. Cancellations made less than 1 month in advance will require full payment.  
**NO REFUNDS WILL BE ISSUED FOR CANCELLATIONS OR CHANGES MADE AFTER THE ONE MONTH PAYMENT DEADLINE.**

### PERFORMANCE CHOICES (Please check ONE. Must use a separate form for each performance)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> <b>Walking the Tightrope (\$5)</b><br>October 13&14, 2016     | <input type="checkbox"/> <b>Goodnight Moon (\$7)</b><br>November 3 & 4, 2016 | <input type="checkbox"/> <b>The Little Prince (\$6)</b><br>February 15 & 16 & 17, 2017 |
| <input type="checkbox"/> <b>Mufaro's Beautiful Daughters(\$5)</b><br>March 6 & 7, 2017 | <input type="checkbox"/> <b>Moon Mouse (\$8)</b><br>April 19 & 20 & 21, 2017 | <input type="checkbox"/> <b>The Painted Garden (\$5)</b><br>May 17 & 18 & 19, 2017     |

CHOICE	DATE	TIME	
First			Order No. (SCFTA use only)
Second			

### PAYMENT (Seats are \$5 to \$8 each. One FREE adult seat will be allotted for every 15 paid student tickets.)

Total number of Students \_\_\_\_\_ + Total number of adults (teachers, chaperones, etc.) \_\_\_\_\_ = Total attending

Total Students attending \_\_\_\_\_ **divided** by 15 = \_\_\_\_\_ Total # of free tickets (round down – example: 5.8 = 5)

Total attending  **minus** Total # of free tickets \_\_\_\_\_ = \_\_\_\_\_ x Ticket price \_\_\_\_\_ = \_\_\_\_\_ Ticket Total  
(See next to performance)

**Ticket Total + \$10.00 administrative fee = \_\_\_\_\_ AMOUNT DUE**

I understand the cancellation policy stated above and that if payment is not received by the Segerstrom Center for the Arts ONE MONTH PRIOR to the performance date, the seats I have reserved will be released for sale to other groups. \_\_\_\_\_  
 Principal signature (required)

### METHOD OF PAYMENT

Bill me with Invoice (Reservation NOT confirmed until payment is received.)

AMEX  MASTERCARD  VISA  DISCOVER

<div style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></div>	<div style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></div>	<div style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></div>	<div style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></div>
Card Number	Exp. date	Name on Card	Authorized Signature

### RESERVATIONS ARE FIRST-COME, FIRST-SERVED:

Mail Order to: Segerstrom Center for the Arts, Attn: Bus-Ins, 600 Town Center Drive, Costa Mesa, CA 92626  
 Fax Order to: 714.556.0156 E-mail Order to: bus-ins@SCFTA.org  
 Questions? Please e-mail to the address above or call 714.556.2122 x 4333, Option 1