



# 2018-2019 ARTS FOR YOUTH RESERVATION FORM

## RESERVATION FORM INSTRUCTIONS

- To ensure legibility, please type in all responses to this form.
- Submit this form **30 days** in advance of your earliest reservation request date.
- **Please note:** Reservations are not confirmed until email confirmation is sent.
- Questions should be directed to [artsforyouth@cityoflancasterca.org](mailto:artsforyouth@cityoflancasterca.org) or (661) 723-5950.
- Every person entering the theatre must have a ticket. Lap seating is not available.

## SCHOOL GROUP GUIDELINES

- **Group Size:** A minimum of 10 students and 1 chaperone
- **Chaperone Policy:** For every 10 students, there must be 1 chaperone present. For every 10 student tickets purchased, one chaperone is free.
- Shows begin promptly. Please arrive 30 minutes prior to show time to allow for seating, seating is first come, first seated.

## SCHOOL GROUP INFORMATION

Name of School: \_\_\_\_\_

School District/ Organization Type: \_\_\_\_\_ Title 1 Funding:

School Address: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

Grade Level(s): \_\_\_\_\_ Teacher/Group Leader Name: \_\_\_\_\_

Teacher Phone Number: \_\_\_\_\_ Teacher E-mail \_\_\_\_\_

Total # of Students: \_\_\_\_\_ Total # of Chaperones (1 per 10 students): \_\_\_\_\_ Total # Seats \_\_\_\_\_

Are you applying for a transportation grant or ticket scholarship: Yes  No

## ACCOMMODATIONS

SPECIAL ACCOMODATIONS: Physical Disabilities  Special Needs  English Learners  Other

Please explain special needs of group in order to plan for accommodations:

MODE OF TRANSPORTATION: School Bus  Car  Public Transportation

## PAYMENT INFORMATION

- A minimum of a 10% deposit is required to make a reservation to attend a performance. If your school pays with purchase order, a 10% deposit is not necessary. We do require the P.O. and completed order form to secure your reservation.
- Payment by check (made payable to the City of Lancaster) or credit card is due 30 days from the day the order is placed.
- Full payment is required via credit card, cash, or check within 30 days from the date the order was placed and always before show date.
- No refunds and no exchanges. Please make every effort to contact us if you know your group (or some) will not be able to attend.

Please submit completed forms to:

Lancaster Performing Arts Center  
 ATTN: Art for Youth Reservation  
 750 W. Lancaster Boulevard  
 Lancaster, CA 93534

Phone: (661) 723-5950 Email: [artsforyouth@cityoflancasterca.org](mailto:artsforyouth@cityoflancasterca.org)



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PERFORMANCES	GRADE	DAY	DATE	TIME	# OF SEATS
Cirque Mechanics		Friday	10/19/18	9:15 AM	
Cirque Mechanics		Friday	10/19/18	11 AM	
Amazing Bubble Man	K-12	Monday	10/22/18	9:15 AM	
Amazing Bubble Man	K-12	Monday	10/22/18	11 AM	
Hillbilly Silly Science Spectacular	3-8	Wednesday	11/7/18	9:15 AM	
Hillbilly Silly Science Spectacular	3-8	Wednesday	11/7/18	11 AM	
CST- It's A Wonderful Life	K-12	Friday	11/30/18	9:15 AM	
CST- It's A Wonderful Life	K-12	Friday	11/30/18	11 AM	
AVB - Nutcracker	K-12	Thursday	12/6/18	11 AM	
AVB - Nutcracker	K-12	Friday	12/7/18	11 AM	
MCT-The Frog Prince	K-12	Friday	2/1/19	11 AM	
How to Survive Middle School	5-8	Wednesday	2/6/19	9:15 AM	
How to Survive Middle School	5-8	Wednesday	2/6/19	11 AM	
Diary of a Worm	K-4	Wednesday	2/13/19	9:15 AM	
Diary of a Worm	K-4	Wednesday	2/13/19	11 AM	
Derik Nelson and Family	4-12	Friday	3/1/19	10 AM	
Charlotte's Web	K-5	Monday	3/4/19	9:15 AM	
Charlotte's Web	K-5	Monday	3/4/19	11 AM	
Reduced Shakespeare	4-12	Friday	3/8/19	10 AM	
Let's Go Science Show	K-8	Monday	3/11/19	9:15 AM	
Let's Go Science Show	K-8	Monday	3/11/19	11 AM	
AVB - Alice in Wonderland	K-12	Friday	5/10/19	11 AM	
AVB - Alice in Wonderland	K-12	Monday	5/13/19	11 AM	
<b>Total # of Seats Requested</b>					

**PAYMENT** (Seats are \$5 each. One FREE adult seat will be allotted for every 10 paid student tickets).

\* 1 chaperon per every 10 students is required. Only enter the amount of chaperons that exceed this amount.

Total # of students \_\_\_\_\_ + Total # of chaperons\* \_\_\_\_\_ = Total Seats \_\_\_\_\_ x \$5 **Total amount due** \_\_\_\_\_

**For box office use only**

Received by \_\_\_\_\_ Date \_\_\_\_\_

Entered by \_\_\_\_\_ Date \_\_\_\_\_

Order total \_\_\_\_\_ Order/Hold # \_\_\_\_\_