

SCHOOL PERFORMANCE ORDER AGREEMENT

Performed at Nathan H. Wilson Center for the Arts

To guarantee seats in lieu of deposit, please complete and return to the FSCJ Artist Series Group Sales department. Please submit a separate form for each show requested. Seats are reserved on a first come, first serve basis. The Nathan H. Wilson Center for the Arts seats 529 patrons. Some shows fill up quickly, so please submit your form as soon as possible.

Contact Information

School Name: _____	Contact Cell: _____
Field Trip Contact Name: _____	E-mail: _____
School Address: _____	
City, State, ZIP _____	County: _____
Principal: _____	School Phone: _____
Bookkeeper Name: _____	Bookkeeper E-mail: _____
School Type: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Homeschool Grades Attending: _____	

Show Information

Performance Name: _____	Select One: <input type="checkbox"/> 10 AM <input type="checkbox"/> Noon
Can you attend a different performance time or join the waiting list if your original selection is full? <input type="checkbox"/> Different Time <input type="checkbox"/> Wait-list <input type="checkbox"/> Both	
# Attending: Students = _____ Adults = _____	Total # tickets required = _____
ALL STUDENTS, PARENTS, TEACHERS, AND CHAPERONES MUST BE INCLUDED IN TOTAL # OF TICKETS AND TOTAL DUE	Total Due: (# tickets x \$8.50) = _____
Special Needs (list # of each, if any): Wheelchair/Walker= _____ Hearing= _____ Sight= _____ Other= _____	

Terms and Conditions (by signing below you indicate acceptance of terms and conditions):

Reservations are made on a first come, first serve basis. Once orders are received, a confirmation invoice will be sent by email within 3 business days notifying contact: if the reservation is guaranteed, has been added to the waiting list (if requested), or if the show is currently booked in full. Reservation guarantees seating. All reservations must be paid in full at least 6 weeks prior to the performance. Any unpaid reservations will be released to the waiting list.

Teacher Signature: _____ School Authorizing Signature: _____
 Print Name _____ Print Name _____

Call us at (904)632-5050 for more information or to request a study guide.

Scan and e-mail to: groupsales@fscjartistseries.org