

BOOKING FORM

 Please complete both sides & return

Date:

PROVIDE SCHOOL DETAILS

Full School Name:

ABN:

School Address:

Mailing address (if different to above):

School

Phone number:

School

Fax number:

Accounts Payable/Finance email:

(Invoices are emailed to directly to Finance)

PROVIDE GROUP/CLASS DETAILS

Subject:

Years

group/s:

Number of

students:

Number

of classes:

Special needs:

Attach a separate document if necessary

Objective of the excursion:

PROVIDE TEACHER DETAILS

Attending Teacher 1

Name:

Position:

Mobile:

Email:

Attending Teacher 2

Name:

Position:

Mobile:

Email:

BOOKING FORM

CHOOSE YOUR SHOWS

Tick (✓) your preferred date

PETE THE SHEEP

Fri 30 Apr, 10am Fri 30 Apr, 1pm Sat 1 May, 11am

THE TEMPEST

Wed 5 May, 11am Thu 6 May, 11am Fri 7 May, 11am

SURVIVORS

Thu 24 June, 10am Thu 24 June, 12:30pm

Fri 25 June, 10am Fri 25 June, 12:30pm

THEM

Thu 12 Aug, 7:30pm Fri 13 Aug, 10am Fri 13 Aug, 1.30pm

COMING OF AGE

Wed 8 Sep, 10am Thu 9 Sep, 11am Fri 10 Sep, 11am

I acknowledge the Booking Terms and Conditions and Visitors Etiquette.

I agree to receive Casula Powerhouse Arts Centre Marketing and Promotion material.

COMPLETE & RETURN

Mail: Locked Bag 7064, LIVERPOOL BC, NSW 1871

Fax: (02) 9821 4273

Email: ppe@casulapowerhouse.com

**OFFICE
USE ONLY**

Date
received

Authorised
by

Tickets
Processed