



School Reservation Form (IMPORTANT - Fill out in full!)

Name of School: _____

Contact Person: _____

Position/Title: _____

School Mailing Address: _____

City: _____ State: _____ Zip _____

Contact E-mail: _____

School Phone: _____ School Fax: _____ Contact Persons Phone: _____

Grade(s) of Students Attending (for seating purposes): _____, _____, _____, _____, _____, _____

Total Number of Students Attending: _____ x \$8.00 per student = \$ _____

Total Number of Chaperones Attending _____ x \$23.00 per chaperone = \$ _____

One teacher is admitted free from each class of 10 or more students

SEATING RESERVATION	
# Teachers/staff attending	_____
# Students attending	_____
# Chaperones attending	_____
Total # in group attending:	_____

PAYMENT INFORMATION	
Amount for Students	\$ _____
Amount for Chaperones	\$ _____
Amount of Check Enclosed	\$ _____

Providing the total number in your group is very important. The exact number of seats requested on this form will be reserved for your group. Any additional attendees that want to attend, after your group reservation has been turned in, must be added through your school ONLY. Deadline of additional attendees may only be accommodated if received in the SEADAC office by March 1st.

Credit Cards accepted upon request. Please contact the SEADAC Office.

*Your reservation and seating assignments **will not** be confirmed until full payment is received.

Seating assignments are filled in the order in which payments are received.

Please note any **special needs** that your group may have: _____

Deadline for reservation & payment is March 7th

Please remit payment to:

Southeast Alabama Dance Company, 3010 Ross Clark Circle, Dothan, AL 36301

Contact us: seadac@graceba.net www.southeastalabamadancecompany.org (334)702-7139