



# SCHOOL GROUP BOOKING FORM

RETURN COMPLETED FORM TO  
MANAGER@NEWTHEATRE.ORG.AU

## JUMP FOR JORDAN BY DONNA ABELA

### SCHOOL DETAILS

SCHOOL NAME

.....

POSTAL ADDRESS

.....

.....

.....

### SEND INVOICE TO

NAME

.....

EMAIL

.....

### BOOKING TEACHER DETAILS

NAME

.....

DEPARTMENT/POSITION

.....

CONTACT PHONE

.....

CONTACT EMAIL

.....

### TICKET PRICES

PER STUDENT \$10

TEACHERS FREE OF CHARGE

**PERFORMANCE DATE: WEDNESDAY 28 NOVEMBER**

**PERFORMANCE YOU WISH TO ATTEND - PLEASE CIRCLE**

**11:30AM**

**7:30PM**

**NUMBER OF STUDENTS** ..... **NUMBER OF TEACHERS** .....

**SIGNED** ..... **DATED** .....