



Education Through Experience  
2011 School Reservation Form

# The Nutcracker

Performances run from 10:00 am until 11:45 am

Name of School \_\_\_\_\_ Grade(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Contact Teacher: \_\_\_\_\_ Teacher's Telephone Number: \_\_\_\_\_

**Reservations PRIOR to September 30th**

Please reserve \_\_\_\_\_ tickets for **The Nutcracker, Thursday, December 1<sup>st</sup>, 2011 at 10:00AM.**

# Attending: \_\_\_\_\_ X \$5.00= \_\_\_\_\_

Please reserve \_\_\_\_\_ tickets for **The Nutcracker, Friday, December 2<sup>nd</sup>, 2011 at 10:00AM**

# Attending: \_\_\_\_\_ X \$5.00 = \_\_\_\_\_

**Reservations AFTER September 30th**

Please reserve \_\_\_\_\_ tickets for **The Nutcracker, Thursday December 1<sup>st</sup>, 2011 at 10:00AM**

# Attending: \_\_\_\_\_ X \$6.00 = \_\_\_\_\_

Please reserve \_\_\_\_\_ tickets for **The Nutcracker, Friday, December 2<sup>nd</sup>, 2011 at 10:00AM**

# Attending: \_\_\_\_\_ X \$6.00 = \_\_\_\_\_

**\*Payment is due with reservation.** Payment Enclosed: \$ \_\_\_\_\_ (Checks payable to Mohawk Valley Ballet)

Do you need an invoice for your records? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please provide mailing address for invoice:

\_\_\_\_\_  
\_\_\_\_\_

**Special Needs**

We have \_\_\_\_\_ participants who need wheelchair spaces. Which Show? \_\_\_\_\_

We have \_\_\_\_\_ participants with other special needs which are \_\_\_\_\_

\_\_\_\_\_ Which Show? \_\_\_\_\_

**Please note:** Full payment must be received prior to performance. Seating is assigned based on the date we receive your reservation and payment.

\*\*\*Early Reservation Deadline September 30th

\*\*\*After September 30th Reservation Deadline November 21, 2011

**Complete this form and mail to:** Mohawk Valley Ballet Education through Experience,  
1 Hopper Street, Utica, NY 13501  
or Fax to: 315-738-7646