

# CHANGE ORDER FORM

## TAMPA THEATRE SCHOOL SHOW PRESENTATIONS SCHOOL CHANGE ORDER FORM

(\*\*please complete in ink!\*\*)

SCHOOL:

CONTACT:

PHONE:

FAX:

FAX COMPLETED  
FORM TO:  
  
NICOLE SOUTHWORTH  
FAX: 813.274.8978  
PHONE: 813.274.5510  
EMAIL: nicole@tampatheatre.org

This page is page of pages being faxed/mailed.

MY SCHOOL CURRENTLY HAS A RESERVATION FOR THE FOLLOWING PERFORMANCE:

PERFORMANCE NAME:

DATE	TIME	GRADE LEVEL	# OF STUDENT TICKETS	# OF COMPED ADULT TICKETS	# OF PAID ADULT TICKETS	# OF ADA NEEDS	** # OF WH	# OF BUSES	AMOUNT DUE

OUR RESERVATION NEEDS TO BE ALTERED TO ACCOMODATE THE FOLLOWING:

PERFORMANCE NAME:

DATE	TIME	GRADE LEVEL	# OF STUDENT TICKETS	# OF COMPED ADULT TICKETS	# OF PAID ADULT TICKETS	# OF ADA NEEDS	** # OF WH	# OF BUSES	AMOUNT DUE

\*\*WH=WHEELCHAIR

\*\*\*COMPLIMENTARY ADULT TICKETS are provided at a ratio of 1 PER 15 STUDENTS. ESE ratio is 1 per 3 students.

NOTE: Tampa Theatre will FAX this form back to you confirming that your change order has been received & processed.

**PLEASE REMEMBER:** Once your ORDER FORM has been received, a seat for each of your students has been reserved. Although attrition due to absences will occur, IT IS NOT ACCEPTABLE to cancel an entire performance or to reduce attendance numbers by more than 10% without a **MINIMUM of three weeks notice (CANCELLATION DEADLINE)**. In the event of a cancellation or reduction in attendance greater than 40% of original reservation AFTER THE CANCELLATION DATE, the school is responsible for **60% of the original reservation**.