



Young People's Concert Registration Form

The Atlanta Chamber Players

January 8, 2008 10:00 A.M. & 12:00 P.M.
Pearce Auditorium - Brenau University

School Name: _____

Teacher or Contact Person's Name: _____

Address Line 1: _____

Address Line 2: _____

City: _____ Zip: _____

Phone Number: _____ E-mail address: _____

Please indicate your preference of performance time. Seating is limited. Registrations are accepted in the order in which they are received for each performance.

<input type="radio"/> 10:00 AM	<input type="radio"/> 12:00 PM
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If this performance can not accommodate your entire group would it be possible for you to attend at the other performance time?

<input type="radio"/> YES	<input type="radio"/> NO
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Indicate the type of school which best describes the students who will attend this performance.

<input type="radio"/> Home School	<input type="radio"/> Private School	<input type="radio"/> Public School
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Indicate the grade category which best describes the students who will attend this performance.

<input type="radio"/> Preschool	<input type="radio"/> Elementary	<input type="radio"/> Middle/High
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Please give us an accurate count of the number of students and chaperones who will be in attendance. We request that there be minimum of one adult per 25 children in attendance.

Number of Students

Number of Chaperones:

Please include any additional comments, special needs or requests below: _____

MAIL OR FAX THIS REGISTRATION FORM TO

Jack Bell Executive Director Gainesville ProMusica Concert Series

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<http://www.gainesvillepromusica.com>