



Rehearsals Begin: Saturday, August 18 ♦ 1:00 - 5:00 pm

Parent Meeting: Saturday, August 18 ♦ 4:30 - 5:00 pm

Rehearsal Schedule: Tuesdays - Thursdays 6:00 - 8:00 pm and Saturdays 1:00 - 5:00 pm

**Performance Dates:** October 5, 6, 12, 13, 19 & 20

Fridays at 7:00 pm and Saturdays at 2:00 pm and 7:00 pm

Ages: 6 & Up Tuition: \$250.00 Early Bird Tuition: \$225 (Paid in full by July 27)

## REGISTRATION INFORMATION (REGISTRATION WILL CLOSE AS PROGRAM FILLS)

Participant Name					
Is this the participant's first ARIEL production?		Yes □	No □		
Date of Birth	_ Age	_ Female □	Male □		
Grade School Name					
Mailing Address					
City	Zip Co	de			
Home Phone					
Mom's Name	Cell # _				
Dad's Name	Cell #_				
Email Contact					
Would you like to be added to ARIEL's email contact list? Yes ☐ No ☐					
How did you hear about us?					

## Please submit completed form to ARIEL Theatrical. Enrollment confirmation will be by mail.

- ♦ Mail: ARIEL Theatrical, PO Box 1268, Salinas, CA 93902
- ◆ Email: ariel@arieltheatrical.org ◆ Phone: (831) 775-0976 ◆ Fax: (831) 256-7316
- ◆ The Karen Wilson Children's Theatre, 320 Main Street, Salinas
- ♦ www.arieltheatrical.org

## PAYMENT INFORMATION (PLEASE DO NOT SEND CASH BY MAIL)

A \$75 non-refundable deposit (per program) is due upon enrollment. Tuition balance due prior to first rehearsal. Payment plans available.

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Payment Method				
☐ Inspire Charter / Ocean Grove : Requested				
	Cash	Amount		
	Check #	Amount		
☐ Credit Card (details below)				
Please charge my Visa ☐ MasterCard ☐				
Card #	!	·		
Expira	tion	V-Code		
Amount to be charged at this time				
Name	on Card			
Date: _		Signature		

Office Use Only				
Balance Due \$	Payment	Date		
Early Bird □				
Paid in Full □				