

UNCHB OF NOTRE DAM

Rehearsals Begin: Saturday, June 16 ♦ 9:00 am - 1:00 pm

Rehearsal Schedule: Mondays - Thursdays 6:00 pm - 9:00 pm and Saturdays 9:00 am - 1:00 pm

Not all cast members are called to all rehearsals.

(There will be no rehearsal July 2 - 4)

Performance Dates: August 3, 4, 10, 11, 17 & 18

Ages: High School and Adult* Registration Fee: \$50

*Children ages 10 and older may enroll in the choir if they are siblings of high school participants or related to adult registrants.

REGISTRATION INFORMATION
(REGISTRATION WILL CLOSE AS PROGRAM FILLS)

Participant Name			
Is this the participant's first ARIEL pr	Yes □	No □	
Date of Birth	Age	_ Female □	Male □
Grade School Name			
Mailing Address			
City	Zip Cod	le	
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)

Payment Method

Cash	Amount	
Check #	Amount	
Credit Card (details	below)	

Please charge my Visa ☐ MasterCard ☐

Card # _____ ____ Expiration ______ V-Code _____

Amount to be charged at this time

Name on Card

Date: _____ Signature _____

Office Use Only

Date

Payment Balance Due \$ ____

Early Bird □

Paid in Full