



# TIKKI TIKKI Tembo

**Rehearsals Begin:** Monday, January 15 ♦ 4:00 - 5:30 pm

**Parent Meeting:** Monday, January 15 ♦ 5:00 - 5:30 pm

**Rehearsal Schedule:** Mondays and Thursdays 4:00 - 5:30 pm

**Performance Dates:** February 23 & 24

Friday at 7:00 pm and Saturday at 2:00 pm and 7:00 pm

**Ages: 5 - 12 Tuition: \$185.00**

### 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 Code \_\_\_\_\_

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? \_\_\_\_\_

### 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.

#### Payment Method

Inspire Charter / Ocean Grove : Requested \_\_\_\_\_

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 \_\_\_\_\_

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

#### Office Use Only

Balance Due \$ \_\_\_\_\_ Payment \_\_\_\_\_ Date \_\_\_\_\_

Early Bird: N / A \_\_\_\_\_

Paid in Full  \_\_\_\_\_