

Step 1 | Patron Information

SCHOOL NAME _____

TEACHER / CONTACT _____

SCHOOL ADDRESS _____

CITY _____ ZIP _____ COUNTY _____

SCHOOL PHONE _____ HOME/CELL PHONE _____

E-MAIL _____

GRADE LEVEL(S) _____ SUBJECT(S) _____

SCHOOL TYPE: Public Public Charter Title One

How will your students be travelling to the Adrienne Arsht Center? If applicable, please indicate how many buses. _____ Bus _____ Individual cars

Step 2 | Performances

Please indicate the performance you are requesting and the number of students and adults attending. Include back-up dates by placing 1, 2, 3, etc. beside your preferred performances.

Luisa Fernanda	Thursday November 10, 2011	
# of students _____	# of adults _____	Total _____
.....		
La Rondine	Thursday January 19, 2012	
# of students _____	# of adults _____	Total _____
.....		
Rigoletto	Thursday January 26, 2012	
# of students _____	# of adults _____	Total _____
.....		
Romeo et Juliette	Thursday April 19, 2012	
# of students _____	# of adults _____	Total _____

Step 3 | Please Sign

I have read and understand the Florida Grand Opera Dress Rehearsal Policies and have completed all registration steps.

Please send the registration form to:

**Education Department
Florida Grand Opera
8390 NW 25th Street
Miami, Florida 33122**

**Or FAX to
305-854-1644**

For Office Use Only

Patron ID: _____

Date Received _____

Date Order Filled _____

Confirmed Production
