



## OAK RIDGE JUNIOR PLAYHOUSE

### School Group Reservation Instruction Sheet

2006-2007

Thank you for selecting Oak Ridge Junior Playhouse productions as field trip opportunities for your school group or organization. Please read this sheet carefully and follow the guidelines for making your reservations.

1. Determine which production(s) you wish to attend. Each production has its own reservation form included. This seasons offerings are:

**JAMES AND THE GIANT PEACH – OCTOBER 5 & 6, 2006**

The amazing adventure of James fulfills the fantasy of anyone who has ever dreamed of escape. The story comes hilariously to life in a delightful dramatization that reveals the wickedness of some, the goodness of others, and the indecision many encounter when faced with crises. *(Approx. 1 hour)*

**THE KING AND I – NOVEMBER 28, 29, & 30, 2006**

More than a dozen local children are featured in this exotic tale. East meets West when an English school teacher serves as a tutor to the many children of the King of Siam. Both strong-willed, Anna and the King keep a firm grip on their respective traditions and values, yet eventually grow to understand and respect one another. *(Approx. 1 ½ hour with stretch break.)*

**THE SLEEPING BEAUTY – JANUARY 25 & 26, 2007**

Due to an unfortunate misunderstanding, an evil fairy places a curse, in vengeance, on a young princess, dooming the beautiful girl to one-hundred years of slumber. Counter measures are put in place to ward off the curse, but only time will tell the tale.. *(Approx. 1 hour)*

**ALEXANDER, WHO'S NOT, NOT, NOT, NOT, NOT, NOT GOING TO MOVE – MARCH 29 & 30, 2007**

Alexander has just received some really bad news. His dad has taken a job and the family has to move to a whole new city. While Alexander barricades his bedroom door, his mom and dad and even his brothers find some special ways to make it easier for Alexander to leave and to help him to understand that home is "where your family is." *(Approx. 1 hour)*

2. Completely fill out your contact information on the upper portion of the reservation form. Incomplete forms will be returned.
3. On form, indicate preferences as to which performance you wish to attend. **Strike through any performances you absolutely can not attend.** Every effort will be made to fulfill your request, but in some cases we may have to offer an alternate performance.
4. Fill in seating request portion of form. List the number of students you wish to book. Also, please indicate the number of chaperones at a ratio of 1 free per 8 students and the number of paying adults that do not fit within the ratio. When booking please be realistic with your numbers. Try not to heavily over book. We realize that it can be difficult to predict class size at the time of the event, but over-booking can cause other groups to be denied reservations due to lack of space. Also, please make sure anyone attending has booked with your group. We are unable to accommodate walk-in patrons.
5. Fill in the amount of your payment and indicate your balance, if any. Groups of 15 or more **students** require a \$50 deposit submitted with reservation request. Groups of 14 or fewer **students** require full payment submitted with request. Groups must include a minimum of **twelve students** to book. Multiple classes/grades from the same school booking the same performance date/time may submit only one deposit. **NO ONE UNDER THE AGE OF THREE (3) ADMITTED.**
6. Mark the check box acknowledging that you have read this page. Unchecked forms will not be processed.
7. Make a copy of the completed form for your records.
8. Mail the completed form(s), along with deposit/ payment to OAK RIDGE JR. PLAYHOUSE, P.O. BOX 5705, OAK RIDGE, TN 37831. **Do not write in or fill in the lower portion of your form(s).** Reservation forms that do not include deposit / payment will not be processed. **CHECKS ONLY, PLEASE.**

#### What Next?

1. After we process your reservations, you will receive a confirmation and receipt. To accept your booking, keep the receipt and return your completed confirmation with any changes or cancellations clearly marked by the indicated due date. Confirmation and any changes and/or cancellations in my reservations must be made by the due date or you will forfeit the deposit and be responsible for payment of the balance indicated.

#### Attending The Show

2. Please try to have your group arrive at the Playhouse by 15 minutes before the performance. School groups on buses should have their drivers unload at the Playhouse entrance then park **across the street** in the parking areas. Please do not park buses in Jackson Square. Groups arriving in cars should also park in the parking area **across the street** from Jackson Square. This is to allow ample parking for patrons of other Jackson Square businesses. Also, groups arriving in multiple vehicles should gather their **entire group outside the theatre** before filing in to be seated.
3. Group leaders should check in at the box office counter at the lobby and pay the balance, if any, on their booking. Balances must be **paid by check only.** Groups will be seated by block seating according to grade level. An entire group will be seated at one time. Anyone attending with a group **MUST** have prepaid **through their group.** We are unable to accommodate walk-in patrons. As groups are seated, please make sure adults are seated at the ends of rows to allow good sight lines for the students.
4. **NO ONE UNDER THE AGE OF THREE (3) ADMITTED**
5. The Playhouse does not have space available for the parking of strollers, child-carriers, or facilities to plug in maternal devices.





**OAK RIDGE JUNIOR PLAYHOUSE**  
School Group Reservation Form

PLEASE FILL OUT FORM COMPLETELY AND MAIL TO:  
Oak Ridge Junior Playhouse, P.O. Box 5705, Oak Ridge, TN 37831-5705  
Incomplete forms will be returned. NO PHONE RESERVATIONS ACCEPTED.

PRODUCTION: THE KING AND I

SCHOOL:

GRADE:

ADDRESS:

CITY:

STATE:

ZIP:

TEACHER / LEADER:

E-MAIL:

SCHOOL PHONE:

FAX:

HOME PHONE:

**SELECT A PERFORMANCE DATE/TIME:**

Indicate preference with a "1" next to your first choice and a "2" next to your second choice. Strike through any performance you absolutely can not attend.

TUE Nov 28, 2006      9:00 AM \_\_\_\_\_

11:15 AM \_\_\_\_\_

WED Nov 29, 2006      9:00 AM \_\_\_\_\_

11:15 AM \_\_\_\_\_

THU Nov 30, 2006      9:00 AM \_\_\_\_\_

\*NOTE: Every effort will be made to provide you with your first choice, but be aware that sometimes slots fill very quickly and an alternate choice may be offered.

**REQUEST SEATING:**

All seating will be assigned in group blocks. Groups of 15 or more **students** require a \$50 deposit submitted with reservation request\*. Groups of 14 or fewer **students** require full payment submitted with request. Group minimum: 12 **students**. **One (1) adult chaperone per eight (8) students** will be admitted free. All other adults must pay.

#students \_\_\_\_\_ @ \$5.00 = \$ \_\_\_\_\_

# free adults \_\_\_\_\_ @ \$0.00 = \$ 0.00

# paid adults \_\_\_\_\_ @ \$12.00 = \$ \_\_\_\_\_

**TOTAL SEATS** \_\_\_\_\_ **TOTAL COST \$** \_\_\_\_\_

DEPOSIT/PAYMENT \$ \_\_\_\_\_

**BALANCE DUE \$** \_\_\_\_\_

\*Multiple classes/grades from the same school booking the same performance date/time may submit only one deposit. NO ONE UNDER THE AGE OF THREE (3) ADMITTED.

By checking here, I acknowledge that I have read the instruction sheet and understand the terms and conditions by which reservations can be made and also understand that confirmation and any changes and/or cancellations in my reservations must be made by **November 17, 2006** or I will forfeit my deposit and be responsible for payment of the balance indicated above.

Signed \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*DO NOT FILL IN BELOW - DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW\*\*\*\*\*



**OAK RIDGE JUNIOR PLAYHOUSE**  
Confirmation for "The King & I"

PERFORMANCE: \_\_\_\_\_ at \_\_\_\_\_

SCHOOL / LEADER:

GRADE:

I wish to **confirm** reservations for:

#students \_\_\_\_\_ @ \$5.00 = \$ \_\_\_\_\_

# free adults \_\_\_\_\_ @ \$0.00 = \$ 0.00

# paid adults \_\_\_\_\_ @ \$12.00 = \$ \_\_\_\_\_

**total seats** \_\_\_\_\_ **total cost \$** \_\_\_\_\_

I wish to **change\*** reservations to:

#students \_\_\_\_\_ @ \$5.00 = \$ \_\_\_\_\_

# free adults \_\_\_\_\_ @ \$0.00 = \$ 0.00

# paid adults \_\_\_\_\_ @ \$12.00 = \$ \_\_\_\_\_

**total seats** \_\_\_\_\_ **total cost \$** \_\_\_\_\_

I wish to **cancel** my reservations\*

\*Changes and/or cancellations must be postmarked by **November 17, 2006**. MAY NOT BE DONE BY TELEPHONE

DEPOSIT/PAYMENT

\$ \_\_\_\_\_

**BALANCE DUE**

\$ \_\_\_\_\_



**RECEIPT**

DATE:

RECEIVED FROM

\$

DOLLARS

FOR

BY



**OAK RIDGE JUNIOR PLAYHOUSE**  
School Group Reservation Form

**PLEASE FILL OUT FORM COMPLETELY AND MAIL TO:**  
Oak Ridge Junior Playhouse, P.O. Box 5705, Oak Ridge, TN 37831-5705  
**Incomplete forms will be returned. NO PHONE RESERVATIONS ACCEPTED.**

**PRODUCTION: THE SLEEPING BEAUTY**

**SCHOOL:**

**GRADE:**

**ADDRESS:**

**CITY:**

**STATE:**

**ZIP:**

**TEACHER / LEADER:**

**E-MAIL:**

**SCHOOL PHONE:**

**FAX:**

**HOME PHONE:**

**SELECT A PERFORMANCE DATE/TIME:**

Indicate preference with a "1" next to your first choice and a "2" next to your second choice. Strike through any performance you absolutely can not attend.

THU JAN 25, 2007      9:00 AM \_\_\_\_\_

10:30 AM \_\_\_\_\_

FRI JAN 26, 2007      10:30 AM \_\_\_\_\_

12:30 PM \_\_\_\_\_

\*NOTE: Every effort will be made to provide you with your first choice, but be aware that sometimes slots fill very quickly and an alternate choice may be offered.

**REQUEST SEATING:**

All seating will be assigned in group blocks. Groups of 15 or more **students** require a \$50 deposit submitted with reservation request\*. Groups of 14 or fewer **students** require full payment submitted with request. Group minimum: 12 **students**. **One (1) adult chaperone per eight (8) students** will be admitted free. All other adults must pay.

#students \_\_\_\_\_ @ \$4.00 = \$ \_\_\_\_\_

# free adults \_\_\_\_\_ @ \$0.00 = \$ 0.00

# paid adults \_\_\_\_\_ @ \$ 8.00 = \$ \_\_\_\_\_

**TOTAL SEATS** \_\_\_\_\_ **TOTAL COST \$** \_\_\_\_\_

DEPOSIT/PAYMENT \$ \_\_\_\_\_

**BALANCE DUE \$** \_\_\_\_\_

\*Multiple classes/grades from the same school booking the same performance date/time may submit only one deposit. **NO ONE UNDER THE AGE OF THREE (3) ADMITTED.**

By checking here, I acknowledge that I have read the instruction sheet and understand the terms and conditions by which reservations can be made and also understand that confirmation and any changes and/or cancellations in my reservations must be made by **January 14, 2007** or I will forfeit my deposit and be responsible for payment of the balance indicated above.

Signed \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*DO NOT FILL IN BELOW - DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW\*\*\*\*\*



**OAK RIDGE JUNIOR PLAYHOUSE**  
Confirmation Form for "The Sleeping Beauty" PERFORMANCE:      at

**SCHOOL / LEADER:**

**GRADE:**

I wish to **confirm** reservations for:

#students \_\_\_\_\_ @ \$4.00 = \$ \_\_\_\_\_

# free adults \_\_\_\_\_ @ \$0.00 = \$ 0.00

# paid adults \_\_\_\_\_ @ \$8.00 = \$ \_\_\_\_\_

**total seats** \_\_\_\_\_ **total cost \$** \_\_\_\_\_

I wish to **change\*** reservations to:

#students \_\_\_\_\_ @ \$4.00 = \$ \_\_\_\_\_

# free adults \_\_\_\_\_ @ \$0.00 = \$ 0.00

# paid adults \_\_\_\_\_ @ \$8.00 = \$ \_\_\_\_\_

**total seats** \_\_\_\_\_ **total cost \$** \_\_\_\_\_

I wish to **cancel** my reservations\*

\*Changes and/or cancellations must be postmarked by **January 14, 2007**. **MAY NOT BE DONE BY TELEPHONE**

DEPOSIT/PAYMENT

\$ \_\_\_\_\_

**BALANCE DUE**

\$ \_\_\_\_\_



**RECEIPT**

**DATE:**

RECEIVED FROM

\$

DOLLARS

FOR

BY



**OAK RIDGE JUNIOR PLAYHOUSE**  
School Group Reservation Form

PLEASE FILL OUT FORM COMPLETELY AND MAIL TO:  
Oak Ridge Junior Playhouse, P.O. Box 5705, Oak Ridge, TN 37831-5705  
Incomplete forms will be returned. NO PHONE RESERVATIONS ACCEPTED.

**PRODUCTION: ALEXANDER WHO'S NOT...GOING TO MOVE**

<b>SCHOOL:</b>		<b>GRADE:</b>
<b>ADDRESS:</b>		
<b>CITY:</b>	<b>STATE:</b>	<b>ZIP:</b>

<b>TEACHER / LEADER:</b>	<b>E-MAIL:</b>
--------------------------	----------------

<b>SCHOOL PHONE:</b>	<b>FAX:</b>	<b>HOME PHONE:</b>
----------------------	-------------	--------------------

**SELECT A PERFORMANCE DATE/TIME:**  
Indicate preference with a "1" next to your first choice and a "2" next to your second choice. Strike through any performance you absolutely can not attend.

THU MAR 29, 2007	9:00 AM _____
	10:30 AM _____
FRI MAR 30, 2007	10:30 AM _____
	12:30 PM _____

\*NOTE: Every effort will be made to provide you with your first choice, but be aware that sometimes slots fill very quickly and an alternate choice may be offered.

**REQUEST SEATING:**

All seating will be assigned in group blocks. Groups of 15 or more **students** require a \$50 deposit submitted with reservation request\*. Groups of 14 or fewer **students** require full payment submitted with request. Group minimum: 12 **students**. **One (1) adult chaperone per eight (8) students** will be admitted free. All other adults must pay.

#students _____	@ \$4.00 =	\$ _____
# free adults _____	@ \$0.00 =	\$ 0.00
# paid adults _____	@ \$ 8.00 =	\$ _____
<b>TOTAL SEATS</b> _____	<b>TOTAL COST</b> \$	_____
	<b>DEPOSIT/PAYMENT</b> \$	_____

**BALANCE DUE \$** \_\_\_\_\_

\*Multiple classes/grades from the same school booking the same performance date/time may submit only one deposit. NO ONE UNDER THE AGE OF THREE (3) ADMITTED.

By checking here, I acknowledge that I have read the instruction sheet and understand the terms and conditions by which reservations can be made and also understand that confirmation and any changes and/or cancellations in my reservations must be made by **March 17, 2007** or I will forfeit my deposit and be responsible for payment of the balance indicated above.

Signed \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*DO NOT FILL IN BELOW - DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW- DO NOT FILL IN BELOW\*\*\*\*\*



**OAK RIDGE JUNIOR PLAYHOUSE**  
Confirmation for "Alexander...Move" PERFORMANCE: \_\_\_\_\_ at \_\_\_\_\_

<b>SCHOOL / LEADER:</b>		<b>GRADE:</b>	
<input type="checkbox"/> I wish to <b>confirm</b> reservations for:	<input type="checkbox"/> I wish to <b>change*</b> reservations to:	<input type="checkbox"/> I wish to <b>cancel</b> my reservations*	DEPOSIT/PAYMENT
#students _____ @ \$4.00 = \$ _____	#students _____ @ \$4.00 = \$ _____	*Changes and/or cancellations must be postmarked by <b>March 17, 2007</b> . MAY NOT BE DONE BY TELEPHONE	\$ _____
# free adults _____ @ \$0.00 = \$ 0.00	# free adults _____ @ \$0.00 = \$ 0.00		<b>BALANCE DUE</b>
# paid adults _____ @ \$8.00 = \$ _____	# paid adults _____ @ \$8.00 = \$ _____		\$ _____
<b>total seats</b> _____ <b>total cost</b> \$ _____	<b>total seats</b> _____ <b>total cost</b> \$ _____		



**DATE:**

RECEIVED FROM	\$
DOLLARS	
FOR	BY