



National Performing Arts Bahamas Cruise Festival THEATER DIVISION

Registration Form

Festival Dates: March 5-8, 2010

Teacher/Director's Name: _____

School/Organization: _____

School Address: _____

City/State/ZIP: _____

Work Phone: (____) _____ Home Phone: (____) _____ Cell Phone: (____) _____

Best Time to Call: _____ Email Address: _____

Number of Students _____ Age Range of Performers _____ Number of Adult Chaperones _____

Productions recently performed: _____

List any recent competitive ratings, honors, or awards that the Theater Troupe has received:

- MORE DETAILED INFORMATION WILL BE REQUESTED AFTER YOUR GROUP IS ACCEPTED.
- PASSPORT INFORMATION FOR ONLINE CHECKIN WILL BE 15-30 DAYS PRIOR TO LEAVING PORT.
- THIS FESTIVAL IS DESIGNED FOR GROUPS OF 25 OR MORE INCLUDING ACTORS, TECH AND STAGE CREW MEMBERS.

I understand that it is my responsibility to get any needed permission/licensing to perform selections from the above listed production. I also grant permission to allow use of any photographic or recorded material of the production to be used for future promotions.

Signature _____ Date _____

Please Fax (810-664-1913) or mail this form and the \$100.00 non-refundable registration fee to:
National Performing Arts Festival
1175 S. Lapeer Road
Lapeer, Michigan 48446-3081

www.nationalperformingartsfestival.com 800-647-9385