

Special Needs

Please explain any special needs requests, so that we may do our very best to meet your needs with the seating assignments.

Payment Method

*We are unable to accept debit or credit cards at this time. Your **full balance is due 30 days prior** to the performance. Failure to pay on time may result in the loss of your seating priority, or cancelation of your reservation.*

Indicate Method of Payment:

Check

Check # _____. *A check for a minimum of 10% of the total payable to the Tucson Regional Ballet must be enclosed. Remaining balance is due 30 days prior to performance.*

Purchase Order

PO # _____. *A copy of the purchase order for the full amount must be enclosed. Please make arrangements with your school district to send the check prior to the date of the performance. If necessary, please make arrangements to hand carry the check to the performance.*

Mail Registration to Tucson Regional Ballet

Upon receipt of this completed form and your payment as indicated above, you will receive an email confirmation and invoice. Seats are filled based on the date of registration.

Tucson Regional Ballet
School Matinee Program
2100 N. Wilmot, Suite 302
Tucson, AZ 85712

Important Reminder

*The TCC, TSO, and TRB **do not permit** food, drink, cameras, cell phones or other electronic devices in the theatres.*

Thank you for your cooperation.

www.tucsonregionalballet.org