

SCHOOL SEASON REQUEST TO BOOK FORM



Please note this a **request to book only** and your booking request is subject to availability. Our Operations Officer will contact you within 5 business days to confirm if your booking has been accepted. Should you not have a response in 5 business days, please call (08) 9335 5044.

✉ **SEND YOUR COMPLETED FORM**

Email with subject line **REQUEST TO BOOK**: admin@sppt.asn.au

Performance Title:		
Performance Date:	Performance Time: <input type="checkbox"/> 10am <input type="checkbox"/> 1pm	Year Group/s of Students:
No. of Students: Standard Price: \$8 per student Group of 40 +: \$6.50 per student		<i>Office use only (FINAL NUMBERS)</i>
No. of Teachers/Carers: 1 free teacher/carer for every 8 children		<i>Office use only</i>
No. Additional Adults: Additional adult ticket price is the same as the student ticket price		<i>Office use only</i>
Notes/Access Requirements: Please include information important/relevant to your booking including access requirements		
Name of School:		
School Mailing Address:		
Main Contact Person Name:		
Main Contact Person Position Title:		
Main Contact Person Email:		
Main Contact Office Phone:	Main Contact Mobile Phone: on the day	
Accounts Email (School Bursar): Invoices will be sent to this email		

TERMS & CONDITIONS

Once your booking has been confirmed, the following terms and conditions apply:

Cancellation clause. The following cancellation fees apply:

- 4 weeks out from performance - 50% of the original quote
- 2 weeks out from performance - 100% of the original quote

Should your booking change, please contact the Bookings and Administration Officer on (08) 9335 5044.

Payment: you will be asked to sign off the final numbers on the day of the performance. Payment can be made either:

- On the day: Cash, Cheque, Visa or Mastercard, OR
- After the performance date: An invoice will be emailed. Payment terms are strictly 14 days from the date of invoice. For invoices not paid within 30 days, a daily late fee of 2.5% will be applied until payment is made.

I confirm the details above and agree to the terms and conditions:

NAME: _____
DATE (DD/MM/YYYY): _____ SIGNATURE: _____

*Office Use Only 4-1120
Booking Ref: _____ Total: _____
Signature: _____