



School Booking Form

1. **School Name** _____

2. **Mailing Address** _____

City _____ **State** _____ **Zip** _____

3. **Phone** _____ **Fax** _____

4. **Please indicate three possible performance dates and times, in order of preference:**

1st choice _____
day of week date/month/year start time

2nd choice _____
day of week date/month/year start time

3rd choice _____
day of week date/month/year start time

5. **Person signing contract and responsible for payment:**

First Name Last Name Title

Mailing address

City State Zip

Phone Fax Email

6. **Contact person on performance day** (direct musicians to space, find outlets, set up slide screen, etc.)

First Name Last Name Title

Phone Fax Email

7. **Performance location:** auditorium cafeteria gym music room other

8. **Estimated Audience**

Number of Students Number of Teachers Number of Parents

9. **Type of piano available** grand upright none

10. **Screen in room for PowerPoint Presentation:** Yes No

11. **How did you hear about Jazzistry™?:** _____