

Attendees:

I am coming: Alone With my parents. _____ # of parents and siblings attending.

Please provide names of attendees below:

I will be attending the play on Friday evening. Please reserve _____ tickets.

I will not be attending the play on Friday evening.

(Note: The production is only available during the November, February and April Vision Days)

Registration Fee Payment Options (\$25 per Family):

Check Enclosed

Credit Card: Visa MC Discover

Credit Card Number: _____

Security Code: _____ Exp. Date: _____

Name on Credit Card: _____

Photo/Video Release:

I, _____, hereby allow College of Santa Fe to use my photo/image or reproduction in media, promotional materials and Web-based promotions for the college. I also waive any rights, royalties, or claim to any salary or income from my photo/image and give my permission for said companies to use these pictures/videos at their discretion.

Initial here if you agree: _____ Date: _____

Parent Signature (if student is under 18) _____