



**PRE-REGISTRATION & RSVP
FOR THE KICK-OFF TO THE 2015/2016 SEASON**

Date | *Sunday, September 20, 2015*
When | *6:00pm - 8:00pm*
Where | *Location will be announced to pre-registered guests*

Total # of guests you
bring to the Kick-off

Name of a parent
(if participating actor is a minor): _____

Address: _____

Phone: () _____ E-mail: _____

Name of Actress/Actor: _____

Grade in school - Fall 2015 _____ School: _____

Name of Actress/Actor: _____

Grade in school - Fall 2015 _____ School: _____

Name of Actress/Actor: _____

Grade in school - Fall 2015 _____ School: _____

Please return this form no later than September 18th, 2015, for final head count and email it to:
info@youthmusicaltheatre.com

or mail it to (has to arrive on or before 9/18/15):

Youth Musical Theatre

Attn.: Bruce Barbee, Executive Producer
22121 Ave. Morelos, Woodland Hills, CA 91364

Please provide a current email address to receive your confirmation and information on the location.