



## PRODUCTION REGISTRATION FORM

NAME OF PRODUCTION

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ACTOR'S NAME AND AGE

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PARENT'S NAME

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ADDRESS

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PHONE

(H) \_\_\_\_\_ (M) \_\_\_\_\_

EMAIL

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TOTAL AMOUNT PAID: \_\_\_\_\_

METHOD OF PAYMENT: chq \_\_\_\_\_ visa \_\_\_\_\_ M/C \_\_\_\_\_

CREDIT CARD #: \_\_\_\_\_

EXPIRY DATE: \_\_\_\_\_ SIGN: \_\_\_\_\_

- Please make cheques payable to: Brisbane Junior Theatre
- Contact: Debbie Bradford – 0438 896 436