

FORM DUE WITH 2ND
DEPOSIT 120 DAYS
PRIOR TO SAILING

PERFORMANCE INFORMATION

FORM DUE WITH 2ND
DEPOSIT 120 DAYS
PRIOR TO SAILING

PLEASE PRINT LEGIBLY

PLEASE PRINT LEGIBLY

SCHOOL/GROUP NAME: _____

TYPE OF GROUP Select Desired Performance(s)

INSTRUMENTAL CONCERT BAND JAZZ BAND FULL ORCHESTRA STRING ORCHESTRA

 OTHER _____

VOCAL SHOW CHOIR JAZZ CHOIR CONCERT CHOIR

 OTHER _____

DANCE DANCE SCHOOL STUDIO TAP DANCE

 OTHER _____

Name of Group to be
sited in Carnival Capers: _____

Sailing Date: (MM/DD/YY) _____

Ship Name: _____

Select One: WORKSHOP PERFORMANCE ONLY FESTIVAL

Special Requests
for Performance: _____

No. of Performers: _____

No. Of Chairs Needed: _____

No. Of Microphones Needed:
(Maximum of 3) _____



Director's Name & Title: _____