Young Audiences Scheduling Worksheet

School_____ **District**_____
Contact Name _____ **Title**_____
Contact Phone_____
Contact Email_____
School Address _____
Mailing Address (if different) _____
Source of Funding for Performance(s) _____

I would like to schedule the following performances:

Artist/Program	Requested Date/Time	Grade Level(s)	Number in Audience	Cost

Total* $_____

***** *A travel mileage fee will be charged for programs occurring at outlying school districts/areas. If this fee is applicable to a performance, a travel mileage fee quote will be given at the time of scheduling.*

Young Audiences of Northeast Texas
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