Application for performance rights to:

ALISON the musical

LIVE BAND/ORCHESTRA VERSION

This form is for companies/schools/groups using a live orchestra/band for the musical

School/company:_____

Producers name:_____

Email:_____

Address:_____

Suburb/Town:_____

State/county:_____ Code:_____

Country:_____

Phone 1 :_____ Phone 2 :_____

Musical Director's name:_____

Email:_____

Theatre/Venue:_____

Address:_____

Maximum seating capacity of venue:_____

Ticket prices:_____ Concession:_____

Number of Performances: _____

Performance Dates: _____

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