

TADA! Youth Theater

SCRIPT RENTAL

PERUSAL FORM



This form should be used once you have selected the play/musical you will be producing and know the dates of your performances.

CONTACT INFORMATION

Name: _____

Business/Company Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

PERUSAL PLAY/MUSICAL INFORMATION

Organizations may sample up to three different plays and/or musicals at one time. Perusal materials include one full script and a selection of a score for each show chosen. Reproduction of any kinds of either scripts or scores is strictly prohibited. Perusal copies are for the sole purpose of choosing the appropriate script for your group - plays and musicals may not be performed until a Letter of Agreement has been obtained from TADA!.

Fees: There is a one-time, *non-refundable*, perusal fee of \$10 **for each show chosen**, which includes one way postage. TADA! must receive this fee before we send your order. Audio files—if available—cost \$5. Once a show has been decided upon, additional scripts and materials must be rented. Unwanted materials must be returned within 30 days of the original order.

Production 1: _____

Is this production a Musical or a Play : Musical Play

Would you like to rent a perusal audio tape: Yes No

Production 2: _____

Is this production a Musical or a Play : Musical Play

Would you like to rent a perusal audio tape: Yes No

Production 3: _____

Is this production a Musical or a Play : Musical Play

Would you like to rent a perusal audio tape: Yes No

Number of Perusal Scripts Requested: _____ x \$10 =

Number of Perusal Audio Files Requested: _____ x \$5 =

TOTAL:

Payment: If paying by check, please mail this form with your payment. Please make checks/money orders payable to TADA!. If paying by credit card, please fax to 212.252.8763 or e-mail this form to vshore@tadatheater.com, or mail to the address below. TADA! charges an additional \$3 for processing fees if paying by credit card.

CREDIT CARD INFORMATION

Circle One: Visa MasterCard _____
Card Number: _____
Expiration Date: _____

Signature: _____
Total Amount: _____

Mail to: TADA! Youth Theater
Attn: Veronica Shore
15 West 28th Street, 3rd Floor,
New York, NY 10001

E-mail: scriptmarketing@tadatheater.com