



## The Historic Tennessee Theatre Youth Arts Alliance Ticket Application

*To encourage cooperative learning, we will accept teachers and group organizers.  
Please choose one contact to act as your liaison.*

Name of School/Organization: \_\_\_\_\_

Name of Contact Teacher/Organizer: \_\_\_\_\_

Names of Additional Teachers/Organizers: \_\_\_\_\_

Name of Principal/Director of organization: \_\_\_\_\_

School/Organization Address: \_\_\_\_\_

School/Organization Phone or Cell phone: \_\_\_\_\_

Contact E-mail Address: \_\_\_\_\_

*E-mail is the most effective way for us to communicate with teachers and groups.*

How did you find out about this program? \_\_\_\_\_

\_\_\_\_\_

**Performance for which you are requesting tickets:** \_\_\_\_\_

\_\_\_\_\_

*You may only request one performance per application.*

Date & Time of Performance: \_\_\_\_\_

Number of students and chaperones: \_\_\_\_\_

School Subject/Class: \_\_\_\_\_

Grade/Age group: \_\_\_\_\_

If your request is approved, how do you prefer to pick up tickets?

*(check one box below)*

Prior to day of show

*(Pick up at the Tennessee Theatre Clinch Avenue box office  
Monday – Friday, 10:00am – 5:00pm)*

Day of show

*(Pick up at Will Call at the door before the performance. A valid photo ID is required in  
order to claim tickets.)*

Name for Will Call tickets: \_\_\_\_\_

Is your group willing to have their picture taken at the theatre and displayed on  
our website and/or in Youth Arts Alliance Literature? *Circle One*    Yes    No

Have you ever applied for tickets through the Tennessee Theatre Youth Arts  
Alliance? *Circle one:*    Yes    No

If “yes,” when, what performance and how many students did you bring?

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If available, would you like study materials for this performance?

*Circle one:*    Yes    No

If “yes,” how will you incorporate the performance and these support materials  
into your classroom?

How do you feel your students will benefit from this program?

Do you currently have a theater program at your school/organization? Do you participate in that program?

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If you do, describe the class work or any productions from recent years.

What additional ways can the Youth Arts Alliance program work with your school/program to continue theater education?

Would you like to receive weekly electronic newsletters with information about upcoming shows at the Tennessee Theatre?

- Yes, I want to receive
- I already receive
- No, I do not want to receive

After the performance we ask that each group share their experience of the Tennessee Theatre and the event they attended so we can inform our current and prospective donors of the impact of this program. Thank you cards, letters and pictures can be forwarded to [srodenbeck@tennesseetheatre.com](mailto:srodenbeck@tennesseetheatre.com) or mailed to Tennessee Theatre, Attn: Susan Rodenbeck, 604 South Gay Street, Knoxville, TN 37902.

**APPLICATION MUST BE COMPLETE WITH SIGNATURES WHEN SUBMITTED**

\_\_\_\_\_  
Teacher/Organizer's Name (please print)

\_\_\_\_\_  
Principal/Director's Name (please print)

\_\_\_\_\_  
Teacher/Organizer's Signature

\_\_\_\_\_  
Principal/Director's Signature

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Date of Signature

***Tickets are subject to availability and we may not be able to fulfill all requests.***

PLEASE MAIL, FAX OR EMAIL THIS COMPLETED APPLICATION TO:

**The Historic Tennessee Theatre Youth Arts Alliance  
Attn: Susan Rodenbeck  
604 South Gay Street  
Knoxville, Tennessee 37902**

**Fax: (865) 684-1201    Attention: Susan Rodenbeck**

**Email: [srodenbeck@tennesseetheatre.com](mailto:srodenbeck@tennesseetheatre.com)**

For more information, please call (865) 684-1143 or (865) 684-1200.

Support provided by



*Without enthusiastic and strongly committed teachers, the Youth Arts Alliance cannot achieve its goals.*

Revised 7/28/10