

# CINDY ORY DANCE STUDIO SEATING REQUEST FORM

**Return this form to the studio by APRIL 1, 2012.**

Please place the form in the envelope hanging in the studio by the seating chart. \_\_\_\_\_

**Do not leave this form on the desk or enclose it with tuition!**

**FAMILY NAME** \_\_\_\_\_

**STUDENT'S NAME** \_\_\_\_\_

**Seating preference** - 1<sup>st</sup> choice - Section \_\_\_\_\_ (Seating Chart posted in the studio and at OryDance.com)  
- 2<sup>nd</sup> choice - Section \_\_\_\_\_

**Handicapped seating** – *These seats will be deducted from your total number of reserved seats.*

Indicate the number of each type of seat needed. **\*\*Maximum of 4 seats\*\***

# \_\_\_\_\_ Wheelchair

# \_\_\_\_\_ Floor seating (can't climb steps)

# \_\_\_\_\_ Walker accessible seat

# \_\_\_\_\_ Accompany Handicapped

Contact telephone \_\_\_\_\_ and E-mail address \_\_\_\_\_ in case we have questions about your handicapped seating request.

**Total number reserved seats** \_\_\_\_\_

Preference to be seated with (limit to 2 families)

\_\_\_\_\_

**\*\*I will not use all of my reserved Seats. I only need \_\_\_\_\_ seats.**

**\*\*family names must correspond on all forms to be included together in the lottery drawing.**

