

# RECITAL ITEMS ORDER FORM - PART 1

(Due May 1<sup>st</sup>)

Student Name: \_\_\_\_\_.

Parent/Guardian Name: \_\_\_\_\_.

**Contact Information:**

Email: \_\_\_\_\_.

Phone: \_\_\_\_\_.

## T-Shirt Orders (Required for Finale Dancers)

*Adult sizes can be ordered in slim or regular cut. All Youth sizes will be ordered in regular cut.*

**T-Shirt Youth Sizes - \$20** (Please indicate the quantity of each size)

X-Small \_\_\_\_\_ Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_ **Total \$** \_\_\_\_\_

**T-Shirt Adult Sizes - \$20** (Please indicate the quantity of each size)

X-Small \_\_\_\_\_ Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_ **Total \$** \_\_\_\_\_

**Total Enclosed \$** \_\_\_\_\_

*Please note if you would like your Adult Sized T-shirt ordered in Slim Cut, otherwise your adult T-shirt order will be ordered in regular cut.*

\_\_\_\_\_  
\_\_\_\_\_.

## Recital Flower Orders

*Flower orders will be delivered to the Milton High School Auditorium for your convenience to pick-up during the first intermission of recital in the lobby.*

**Wild Flower Mix**

Small: \$15 x Quantity \_\_\_\_\_ = Total \$ \_\_\_\_\_

Medium: \$20 x Quantity \_\_\_\_\_ = Total \$ \_\_\_\_\_

Large: \$25 x Quantity \_\_\_\_\_ = Total \$ \_\_\_\_\_

**Crazy Daisies**

Medium: \$25 x Quantity \_\_\_\_\_ = Total \$ \_\_\_\_\_

**Roses (circle red, yellow, or pink)**

6 Roses (red, yellow, pink): \$36 x Quantity \_\_\_\_\_ = Total \$ \_\_\_\_\_

12 Roses (red, yellow, pink): \$56 x Quantity \_\_\_\_\_ = Total \$ \_\_\_\_\_

**Total Enclosed \$** \_\_\_\_\_

# RECITAL ITEMS ORDER FORM - PART 2

(Due May 1<sup>st</sup>)

Student Name: \_\_\_\_\_.

Parent/Guardian Name: \_\_\_\_\_.

**Contact Information:**

Email: \_\_\_\_\_.

Phone: \_\_\_\_\_.

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## Memory Book

*(All profits from memory book sales benefit The P.A.C.E. Studio's Performance Company.)*

\$20 x Quantity \_\_\_\_\_ =

**Total \$** \_\_\_\_\_

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## Best Wishes

*(All profits from memory book sales benefit The P.A.C.E. Studio's Performance Company.)*

- \$10 for recital program.
- \$15 for recital program and memory book page.

*Must be 25 words or less.*

*Please write in print.*

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Quantity \_\_\_\_\_ x \$10 or \$15 =

**Total \$** \_\_\_\_\_

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## Medal Orders

*(All profits from Medal sales benefit The P.A.C.E. Studio's Performance Company.)*

*Receive a medal with "The PACE Studio 2018 Recital" engraved on the back.*

*We will have a sample hanging up in the lobby of the studio.*

Quantity \_\_\_\_\_ x \$10 per Medal =

**Total \$** \_\_\_\_\_

**Total Enclosed \$** \_\_\_\_\_

*\*All recital orders benefiting The PACE Studio Performance Company must be made by cash or check.*

# Memory Book Advertisements

*(All profits from memory book advertisement sales benefit The P.A.C.E. Studio Performance Company.)*

If you would like to purchase a page to advertise your business or purchase a page to dedicate to your dancer(s), please fill out the form completely. Memory book ads will be published in the back pages of the Memory Book.

## **PRICING**

- |                          |                      |              |
|--------------------------|----------------------|--------------|
| <input type="checkbox"/> | <u>Quarter Page:</u> | <u>\$25.</u> |
| <input type="checkbox"/> | <u>Half Page:</u>    | <u>\$40.</u> |
| <input type="checkbox"/> | <u>Full Page:</u>    | <u>\$55.</u> |

*Please check one. Limited to one ad per business. Ads will be printed in black and white.*

## **Address and Contact Information**

\_\_\_\_\_  
*Business Name (if applicable)*

\_\_\_\_\_  
*Phone Number*

\_\_\_\_\_  
*Street Address (City, Zip, State)*

\_\_\_\_\_  
*Email Address*

\_\_\_\_\_  
*Contact Name*

***With this order form, please supply your ad in a hard copy  
or an electronic copy of your business ad (preferred).***

***Email electronic copies to [pacestudio@live.com](mailto:pacestudio@live.com)***

***(JPG or GIF format)***

*\*All recital orders benefiting The PACE Studio Performance Company must be made by cash or check.*

*\*Please return form and payment to the office by May 1<sup>st</sup>.*

*\*Please make checks payable to The P.A.C.E. Studio.*