

Tuesday 6 – Thursday 8 June: Christchurch & Friday 9 June: Dunedin
Monday 11- 12 September: Wellington & Wednesday 13 – 15 September: Auckland

We can't wait to receive your booking! Email: info@poetryinaction.com.au or call 09 889 9053
 Tickets are NZ\$10 per student and a minimum booking of 100 students at a minimum rate of NZ\$1000 per show is applicable, with each student thereafter charged an additional NZ\$10.

POETRY ACTION

| BOOKING CONTACT DETAILS | | |
|-------------------------|-------------|-----------|
| Contact Teacher: | Position: | |
| Your email: | Mobile: | |
| SCHOOL DETAILS | | |
| School Name: | | |
| School Address: | | |
| Suburb: | City: | Postcode: |
| School Phone: | School Fax: | |
| Accounts Payable Name: | | |
| Accounts Payable Email: | | |

- Select your desired poetry performances and propose two dates and times for each show in accordance with when PIA are visiting your region.
- We will do our best to accommodate your school at the times suggested. We will be in touch to discuss alternative dates if necessary.
- PLEASE NOTE THAT RECEIPT OF THIS FORM DOES NOT GUARANTEE YOUR REQUEST SO PLEASE REFRAIN FROM BOOKING A PERFORMANCE SPACE AND SENDING OUT PERMISSION SLIPS UNTIL YOU HEAR BACK FROM A MEMBER OF OUR TEAM VERIFYING THE DETAILS OF YOUR BOOKINGS.

| The Paper Tiger Suitable for Year 7 & 8 | | Words that Changed the World Suitable for Year 8 - 10 | | Words of War: Year 11 & 12 (Or students studying World War 1 Poetry) | |
|--|---------------------------------|--|---------------------------------|---|---------------------------------|
| 1 st Requested Date: | 2 nd Requested Date: | 1 st Requested Date: | 2 nd Requested Date: | 1 st Requested Date: | 2 nd Requested Date: |
| Requested Time: | Requested Time: | Requested Time: | Requested Time: | Requested Time: | Requested Time: |
| Student Year(s): | Student Year(s): | Student Year(s): | Student Year(s): | Student Year(s): | Student Year(s): |
| Estimated # of students: | Estimated # of students: | Estimated # of students: | Estimated # of students: | Estimated # of students: | Estimated # of students: |

TERMS AND CONDITIONS

Please read carefully the terms and conditions to which you are agreeing. This booking form is a binding agreement between PIA and the school.

- **Payment:** We request 50% upfront payment within 10 business days of receipt of your deposit invoice in order to secure your booking/s. Your balance invoice will be issued after the performance and is due for settlement within 10 business days. **PIA balance invoices are always issued for payment based on the larger number between your original booking numbers and the actual attendance numbers on the day.** If you have concerns regarding this policy consider revising your booking numbers down by 10-15% on this form before submission. The school is liable to make any payments by due dates.
- **Contact Teachers and student numbers:** It is the booking teachers responsibility to ensure student numbers are accurate, payment is organised and the school is notified of the booked activities. **If a booking teacher leaves the school, it is their responsibilities to inform PIA of a new contact.**
- **Cancellations and changes:** must be made in writing to PIA. If a cancellation is made with **more than 8 school weeks** to the performance **the school will forfeit their deposit.** If a cancellation request is received with **less than 8 school weeks to the performance date your school is liable to pay the full value of the booking in total.** If you need to reschedule, PIA will endeavour to accommodate requests for changes but reserve the right to retain original arrangements and charge the full value of the booking in total if this cannot be achieved. Cancellations by PIA will result in rescheduling at a mutually agreed time and PIA shall refund any payment made by the school if this cannot be accommodated.

I have read and agree to the terms and conditions on this booking form and understand that this document forms a binding agreement between PIA and my school. **TWO SIGNATURES ARE REQUIRED TO VALIDATE THIS BOOKING FORM.**

| | | | |
|------|-----------|------|--|
| NAME | SIGNATURE | DATE | <input type="checkbox"/> Booking Teacher <input type="checkbox"/> Head of Department <input type="checkbox"/> Deputy Principal <input type="checkbox"/> Principal |
| NAME | SIGNATURE | DATE | |