

2015- 2016 Registration Form

School Name :

School Contact Name :

School Contact Email:

School Contact Telephone :

Show Title :

Show Dates and Times:

Address where performances will be held (Please include Zip Code)

Please email this form back to [baltimoretheatreawards@gmail.com](mailto:baltimoretheatreawards@gmail.com)

Please send check via regular mail to:

Baltimore Theatre Awards

C/o Laura Miller

Beth Tfiloh High School

Creative Arts Department

3300 Old Court Road

Baltimore, MD 21208

CHECKS MADE OUT TO: Baltimore Theatre Awards