



Opera: Up Close & Personal

PROGRAM REQUEST FORM

School: _____ School Telephone: _____

School District: _____ School Fax: _____

School Address: _____ School E-mail: _____

City, State, Zip: _____

Music Teacher: _____ Contact Person (if different): _____

Title/Position: _____ Address (if different): _____

City, State, Zip: _____

Telephone & E-mail address (if different): _____

A one-hour block of time needs to be reserved in the performance area for the 45-minute performance.

If the class size exceeds 50 students, a double performance must be booked. Schools requesting a double performance should list a two-hour time period.

1. Date _____ Time _____

2. Date _____ Time _____

**Please return completed form to: Mackenzie Dehmer, Education Department
Lyric Opera of Kansas City
1616 Broadway
Kansas City, MO 64108**

You may fax the form to: 816-471-0602

You may e-mail the form to: mdehmer@kcopera.org

For further questions or information, call 816-471-4933, ext. 126.