



EDUCATION & COMMUNITY PROGRAMMING
Confirmation Form/Performance Contract
Improv Opera

Performance Date:

Time:

School/Organization:

Address:

Billing Address (if different) _____

Performance Location:

Size of Audience _____ Age Level _____

Contact Person:

Phone _____ Best Time to Call _____

E-Mail _____ Quoted Fee: _____

Please provide for us a performance space and a tuned piano. Thank you.

Please sign, date, and return this form to the Opera Columbus, ATTN: Eric McKeever,
177 E. Naghten St., Columbus, OH 43215

Signature _____ **Date** _____