



# Group Registration Form

## 2010 Chicago International Children's Film Festival

c/o Facets Multi-Media, Inc.  
1517 W. Fullerton Ave.  
Chicago, IL 60614  
Tel: 773-281-9075 Fax: 773-929-0266  
[kidsfest@facets.org](mailto:kidsfest@facets.org), [fldtrips@facets.org](mailto:fldtrips@facets.org)  
[www.cicff.org](http://www.cicff.org)

### Group Contact Information

Name: \_\_\_\_\_

School/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: W \_\_\_\_\_ C \_\_\_\_\_ H \_\_\_\_\_

*It can be difficult to contact teachers during business hours...personal numbers are a big help.*

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Other contact name & number: \_\_\_\_\_

*(at school or organization)*

### Group Information

No. of children in group: \_\_\_\_\_ Age range: \_\_\_\_\_ Grade: \_\_\_\_\_

No. of adult chaperones: \_\_\_\_\_

### Screening Information

\_\_\_\_\_ Festival Screenings: October 22 & 25-29

\_\_\_\_\_ Post-Festival Screenings: November 1-5 & November 8-12

Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_

Program: \_\_\_\_\_

- Location: \_\_\_\_\_ Facets Multi-Media (1517 W. Fullerton Ave., Chicago)  
\_\_\_\_\_ Bank of America Cinema (4901 W. Irving Park, Chicago)  
\_\_\_\_\_ University of Chicago - Max Palevsky Cinema, Ida Noyes Hall (1212 E. 59th St, Chicago)  
\_\_\_\_\_ Peggy Notebaert Nature Museum (2430 North Cannon Drive, Chicago)  
\_\_\_\_\_ Regal Cinemas - City North Stadium 14 (2600 N. Western Avenue, Chicago)  
\_\_\_\_\_ Illinois Institute of Technology - Hermann Hall, McCormick Auditorium (3241 S. Federal St., Chicago)

### Refreshments

A refreshment package (one small popcorn & one small soda) is available at the Facets location ONLY. Refreshment packages MUST be pre-arranged with the Group Sales Coordinator. This refreshment package is \$3.00 each, per person (student & chaperone).

\_\_\_\_\_ Yes, my screening is at the Facets location and our group would like to pre-arrange refreshment packages.

Number of refreshment packages: \_\_\_\_\_ @ \$3.00 each = \_\_\_\_\_

Refreshment restriction notes (no caffeine, etc.): \_\_\_\_\_

## Ticket Information & Pricing

Regular Admission - \$7.00 per student

Groups of 25 or more - \$6.00 per student

Teachers & Chaperones – FREE\*

Number of students:

Groups 25+ \_\_\_\_\_ @ \$6.00 = \$ \_\_\_\_\_

Groups under 25 \_\_\_\_\_ @ \$7.00 = \$ \_\_\_\_\_

Number of Adult Chaperones \_\_\_\_\_ = FREE\*

Additional Fees \_\_\_\_\_ = \$ \_\_\_\_\_

*Additional fees may apply for additional chaperones*

Group Ticket Total = \$ \_\_\_\_\_

Deposit Due (30% of ticket total) = \$ \_\_\_\_\_

Ticket Balance (due day of screening) = \$ \_\_\_\_\_

No. refreshment packages (Facets ONLY) \_\_\_\_\_ @ \$3.00 = \$ \_\_\_\_\_

*Refreshment packages MUST be pre-arranged with Group Sales Coordinator.*

Total Due Day of Screening = \$ \_\_\_\_\_

\*Free chaperones are based on an approximate 10:1 ratio of students to teachers. If the ratio is higher than 10:1, additional chaperone fees may apply.

## Payment Information

Payment Method (check one): Check/Cash: \_\_\_\_\_ Credit Card: MC \_\_\_\_\_ Visa \_\_\_\_\_ AMEX \_\_\_\_\_ Disc \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Authorizing Signature: \_\_\_\_\_

## Group Screening Agreement

Please read & initial each of the following...

\_\_\_\_\_ I understand that my group should arrive at the theater 15 minutes early before showtime.

\_\_\_\_\_ If my group arrives late, I understand that the program will have started. Films must start on time and will not be delayed for missing or late groups regardless of their size and/or circumstance.

\_\_\_\_\_ I understand that my school or organizations is responsible for all transportation arrangements.

\_\_\_\_\_ I understand that deposit refunds are only available to groups who cancel 10 business days before their attendance dates.

I (signature) \_\_\_\_\_ of (school or group) \_\_\_\_\_ verify that I am authorized to book a program for the CICFF and understand all of the policies outlined above.

## Questions?

Contact Group Sales Coordinator at:

Phone: 773-281-9075 E-mail: [fldtrips@facets.org](mailto:fldtrips@facets.org) Fax : 773-929-0266

Visit our website at [www.cicff.org](http://www.cicff.org) for complete Festival info!

For general information, or to mail this form, please send to:

Chicago International Children's Film Festival  
Attn: Group Sales  
1517 W. Fullerton Ave.  
Chicago, IL 60614