

CITY OF REEDLEY AND RIVER CITY THEATRE COMPANY
Dress Rehearsal Application

Date:	
Name of School or Organization:	
Mailing Address:	
Contact Person:	
Phone:	
School or Non-Profit Organization:	Public Private Non-Profit (circle one)
State Non-Profit Number: <i>(nonprofits only)</i>	
Number of Reedley participants estimated to attend (maximum 85):	
Description of group's mission and the participants who will be attending the dress rehearsal. <i>(You may attach additional paperwork if desired.)</i>	