



“A Chorus Line”

Westchester Broadway Theater

Thursday, March 29

11:15 am Show and Lunch

A new offering for us! The recipient of the Pulitzer Prize and nine Tony Awards including Best Musical, is one of the true masterpieces of live theater. A celebration and true-to-life depiction of performers and their struggle to achieve greatness on the Broadway stage. Its powerful stories are touching, funny, inspiring and relatable to anyone with a passion for performing. The show is a brilliantly complex fusion of dance, song and compellingly authentic drama. Memorable musical numbers include "I Can Do That", "At the Ballet", "Dance: Ten; Looks: Three", "The Music and the Mirror", "What I Did for Love", "One (Singular Sensation)" and "I Hope I Get It". We'll enjoy a full three course meal on site along with beverage service and then this amazing Musical, right from your seat!

COST: \$105 Includes motor transportation, driver gratuity, snacks, admission to theater, three course meal

Provide the name(s) **and** signature(s) of participant(s). **NOTICE:** By signing this form, you agree to the terms of payment AND you attest that you have read, understand, and agree to the following **WARREN PARKS & RECREATION RELEASE STATEMENT:** The Town of Warren (the "Town") expressly disclaims for itself and for its officers, commissioners, employees and agents, all liability for any loss or damage to property or bodily injury or death arising from or related to the undersigned's participation in the Town sponsored activity specified herein and the undersigned hereby knowingly, intentionally and expressly: (1) assumes the risk for any such loss, damage, bodily injury or death; (2) Releases the Town and its officers, commissioners, employees and agents from all liability for any such loss, damage, bodily injury, or death; and (3) Waives any claim or cause of action which the undersigned may have against the Town or its officers, commissioners, employees and agents for any such loss, damage, bodily injury or death. Furthermore, if I, the participant, cannot be reached, I give my permission to the physician selected by the Recreation Department or program supervisor to hospitalize, acquire prompt treatment for, and to order injection, anesthesia, or surgery for myself.

NAME 1: _____ SIGNATURE 1: _____

NAME 2: _____ SIGNATURE 2: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

NO. OF TIX _____ @ \$105 PER PERSON = TOTAL COST \$ _____. ENCLOSED IS MY **50% DEPOSIT OF \$ _____**.

BALANCE DUE 45 DAYS BEFORE TRIP. MAKE CHECK(S) PAYABLE TO: WARREN PARKS & RECREATION,

Mail to: WARREN TOWN HALL, WARREN PARK AND REC, 50 CEMETERY ROAD, WARREN, CT 06754.

For **Office Use Only**—Check NO: _____ Date: _____

Balance Owed: _____ **Check NO:** _____ **Date:** _____