



Pensacola Opera's
"Little Women" Reading Project
REGISTRATION FORM

Yes! We wish to enroll our organization/school in the Little Women Reading Project!

Organization/School Name _____

Contact Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

PARTICIPANT INFORMATION:

# of Participants	Book	Price	Subtotal
	Little Women Novel – Original Version	\$5	
	Little Women Novel – Adapted Version	\$5	
	Little Women Novel – Spanish Version	\$10	
TOTAL			

FINANCIAL ASSISTANCE:

Our group is in need of financial assistance for the Little Women Reading Project

Please check one: FULL ASSISTANCE

PARTIAL ASSISTANCE; we can afford \$_____ of the total project costs

Signed: _____

Date: _____

Print: _____

Title: _____