

Seussical Video/DVD Order Form

_____ # of Videos (\$25 each)

_____ # of DVDs (\$30 each)

Check #: _____

Cash:

Paid: **Yes:**

No:

Cast Member's Name: _____

Parent's Name

*(Is it different than cast member's
Last name?):* Yes:

Role: _____

Address on Check: _____

Mailing Address:

Same as on Check:

Home Phone Number: _____

Cell/Work Number: _____

E-Mail: _____

Please return this completed order form, along with your check made out to **Gas Lamp Inc.** to **Brian Baskin at rehearsals**, or mail to Gas Lamp Inc., 17 Herman Street, Glen Ridge, NJ 07028.