

MASTER CLASS & MULTIMEDIA PRESENTATION

Make Your Own Damn Movie! Master Class **BOOKING FORM**

SCHOOL/ORGANIZATION		
DEPT	_ CONTACT NAME	
ADDRESS		
PHONE		
ROOM NUMBER / BUILDING OR VEN		
NUMBER OF STUDENTS ATTENDING		
MAKE YOUR OWN DAMN MOVIE! MASTER CLASS SIZES: (check one)		
□ Lite	Dates Requ	uested:
□ 1 Day	1.)	
□ 2 Day	2.)	
Requested Budget: \$	3.)	
FORM OF PAYMENT: (check one)		
□ Check	Organization will supply:	A/V (list facilities):
☐ Money Order	□ Hotel	□ TV/Projection
Remit to:	□ Airfare	□ DVD Player
Troma Entertainment ATTN: Kiel Walker 733 Ninth Ave. New York, NY 10019	□ Transportation	□ Other:
	□ Other:	
or by FAX:		



(212) 399 9885