



# Book Nook Australia's Performing Arts Bookshop RECOMMENDATION REQUEST FORM

*\* Required Details*

## CONTACT DETAILS

First Name \* \_\_\_\_\_ Last Name \* \_\_\_\_\_

Email Address \* \_\_\_\_\_

Mobile Number \_\_\_\_\_ Work Number \_\_\_\_\_

School \* \_\_\_\_\_

Work Address \_\_\_\_\_

Suburb \* \_\_\_\_\_ State \* \_\_\_\_\_ Postcode \_\_\_\_\_

## CLASS / STUDENT GROUP DETAILS

Age /Grade of Students \* \_\_\_\_\_ Gender mix of students \* \_\_\_\_\_

Cast Size \* \_\_\_\_\_ For Performance or for Study \* \_\_\_\_\_

Performance Experience of Students \* \_\_\_\_\_

Play Genre \* \_\_\_\_\_

## PLAY DETAILS

Desirable Issues \* \_\_\_\_\_  
\_\_\_\_\_

Undesirable Content \* \_\_\_\_\_  
\_\_\_\_\_

Favourite Play used for this level & why you enjoyed it \* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_