



The Girl Scout Council of Greater New York in collaboration with *Students Live* are offering an **AMAZING** once in a lifetime opportunity to see the Multiple Award-Winning Show



Not Available to the General Public!
Premiere our Exclusive Broadway Girl Scout Event

SATURDAY, JANUARY 31, 2009

Interactive Broadway Workshop from 9:15 AM-11:30 AM
 Broadway Matinee of *Wicked* at 2:00 PM

Package includes Interactive Workshop, Interactive Resource Guide, Special Girl Scout Patch, and Preferred Seating to the Show for only \$136.25 (Orchestra/Front Mezzanine), limited seating at \$101.25 (Rear Mezzanine F-G) and \$76.25 (Rear Mezzanine H-M)

The Exciting Education Workshop includes...

- High Profile Female Key Note Speakers who are Successful Industry Leaders in their Field
 - Learn Music and Choreography from the Show
 - Present Community Service Projects for Members of the Broadway Company
- Interact with *Wicked* Cast Members and Behind the Scenes Creative Team Professionals in an Intimate Question and Answer Session
 - Earn an Exclusive *Wicked* Girl Scout Patch
 - Interact with the Girl Scouts for other communities
- Attend the 2:00pm Matinee Performance of *Wicked* with an Audience of Girl Scouts!

Chance to win a backstage visit!

Seats are going fast! **BOOK NOW** and don't be disappointed! **First Come, First Served.**
Non-Refundable 50% Deposits Must Be Made by May 23, 2008
Final Payments Must Be Made By September 19, 2008

TO PURCHASE TICKETS AND FOR MORE INFORMATION CALL 212-645-4000 ext. 227or 228.

Please return the bottom of this form with a check or money order made payable to: Girl Scouts of Greater New York or provide credit card information.

Mail to:
 Girl Scout Council of Greater New York, Inc.
 43 West 23 Street
 New York, NY 10010
 Attn: **WICKED Broadway Event**

Troop # _____
Age Level _____
Service Unit _____

Leader's Name _____ E-mail Address _____

Street Address _____

City _____ State _____ Zip Code _____

Day Telephone # _____ Evening Telephone # _____

of Registered Girls Attending _____ @ \$ _____ = \$ _____

of Registered Adults Attending _____ @ \$ _____ = \$ _____

Total Amount Due = \$ _____

Payment by Credit Card:
 Amount \$ _____
 Please bill my: Visa MasterCard American Express Discover
 Name as it appears on the card: _____
 Signature: _____ Today's date: _____

Please check one:
 I am enclosing full payment of \$ _____
 I am enclosing 50% DEPOSIT per person for a total of \$ _____