



## TICKET ORDER FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

### Season Tickets *Our best value!*

	Total \$
_____ (qty) @ 45 (ADULT)	\$ _____
_____ (qty) @ \$30 (SENIOR)	\$ _____

### Single Tickets

_____ (qty) @ \$15 (ADULT)	\$ _____
_____ (qty) @ \$10 (SENIOR)	\$ _____
_____ (qty) @ \$5 (STUDENT)	\$ _____

Please indicate which Christmas concert you plan to attend: (*circle one*)

- Tuesday, December 10, 2019, @ 7:30pm
- Friday, December 13, 2019, @ 7:30pm

### Moonlight & Music

\_\_\_\_\_ (qty) @ \$60 \$ \_\_\_\_\_

Donation in the amount of \$ \_\_\_\_\_

**TOTAL** \$ \_\_\_\_\_

### Method of Payment:

Check in the amount of \$ \_\_\_\_\_

Credit Card in the amount of \$ \_\_\_\_\_

Card Number: \_\_\_\_\_

Exp Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

*Thank you for supporting Chorale Acadienne!*