

La Crosse Community Theatre Ticket Mail Order Form

① Name(s) _____ Daytime Phone _____

Show Title: _____ Preferred Date: _____

(first choice) (second choice)

Preferred Seats: _____

② Use second performance date (choose one)

- only if first choice is sold out
- if seats near my preference are unavailable
- if my preferred seats are unavailable

③ Tickets Requested

- _____ Season tickets
- _____ Complimentary tickets (Enclose "Bring-a-Friend" or "comp" card.)
- _____ General tickets at \$22.50 (Fri/Sat) or \$21.00 (Thu/Sun) =
- _____ Student or active military tickets at \$10.00 =

Total Amount Enclosed =

④ Form of Payment

- A check is enclosed for my general and/or student/military tickets.
- Charge my general and/or student/military tickets to my credit card. (Visa, Mastercard or Discover)

Card # _____ Exp. _____

Signature _____

⑤ Other season ticket holders are coming with me; I would like to reserve their seats also:

- _____ Season Tickets for _____
- _____ Season Tickets for _____
- _____ Season Tickets for _____

Tickets will be held at the box office or will-call table.

If you wish to receive your tickets by mail, please send a self-addressed, stamped envelope.

Please notify the box office of any special needs, such as wheelchairs or hearing assistance equipment. Ticket reservations are filled in the order received. Patron donors and season ticket holders may reserve seats before tickets go on sale to the public. (See our web site for details.) Mail orders are not confirmed by phone, but customers may call the box office to confirm. Payment must accompany all orders for non-season tickets.

