Plenty Ranges Arts Centre Theatre Ticketing Order Form – ONLINE SALES ONLY

PLEASE FILL OUT THE	FC)LL(WC	INC	11 6	٧F	OF	RM	ΑT	101	11 V	<u> </u>	LO	Ck	(LI	ET	ΓER	<u>88</u>		
Presenting Company				I																
Name of Concert							Pr 	es	er	nts										
Date of Performance 1 Performance Start Time)			/ [:[/ []			`	_			9/20) Al		3)	
Date of Performance 2 Performance Start Time	<u>)</u>			/[:[/ [`	_			9/20) Al		3)	
Date of Performance 3 Performance Start Time				/ [/ []			`	_			9/20) Pl		3)	
All performances will have allocated seating																				
Please specify prices: (Include Ticketing Fee If Applicable)	-	(Chi Gro	ult: nce: ldre oup oup	n: 10):		\$_ \$_ \$_ \$_												
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Do you want complimentary tickets reserved? ☐ Yes ☐ No - If yes how many tickets would you like reserved For which show do you require the complimentary tickets? ☐ Performance 1 ☐ Performance 2 ☐ Performance 3																				
When would you like your ticke		to (app	lie	s.									[\prod	
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Please submit a jpe	•	Ī															•	•		
All information supplied on this for I verify that all information on t								iges	s Wi	ll be	e do	ne s	so a	t th	e co	ost o	of the	e hi	rer.	
													(si	gne	ed b	y tl	ne h	irei	·)	
Office Use Only																				 \neg

Tickets designed Date _____

On Sale date _____