

The Sound of Music Ticket Order Form

Name _____ Phone (____) _____

Mail my tickets to:

Your Name _____

Address _____

City/State/Zip _____

<u>Performance Date</u>	<u># of Tickets @ \$8</u>	<u>\$ Total</u>
• Thursday, May 7 at 7:00 PM	_____	_____
• Friday, May 8 at 7:00 PM	_____	_____
• Saturday, May 9 at 7:00 PM	_____	_____
<u>Total # Tickets ordered</u>	_____	
<u>Total \$ Enclosed</u>	_____	

Please make checks payable to "Lincoln-Way East Music Department." Checks must accompany this order. All ticket orders must be dropped off in the main office at Lincoln-Way East High School by May 1, 2009, or mailed to the following address by April 25, 2009:

Lincoln-Way East H.S. Music

Attn: Lynae Bleeker

201 Colorado Avenue

Frankfort, IL 60423

Tickets will be sent by mail if order is received prior to May 1st. If orders are received after May 1, then tickets will be held at *Will Call* and can be picked up the night of the performance. Seating will be assigned as best available at the time your order is received.

For office use: Check # _____ \$ _____ Date Received _____
