



Where something OLD becomes NEW again!

Musical Ticket Order Form

Ticket Hotline: 217-787-1595 x. 153

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Day Phone: _____ Evening Phone: _____

Deliver to Student's Name: _____ 7th period Room _____
OR

Please mail tickets (If ticket request is less than two weeks before opening night, tickets will be available at the box office.)

Theater Seating Preference:

None Center West East Aisle Best Available

Thursday, March 18 – **7:30 p.m.**

Tickets: _____ Adult (\$10) _____ Student/Senior (\$8) \$ _____

Friday, March 19 – **7:30 p.m.**

Tickets: _____ Adult (\$10) _____ Student/Senior (\$8) \$ _____

Saturday, March 20 – **2:30 p.m.**

Tickets: _____ Adult (\$10) _____ Student/Senior (\$8) \$ _____

Saturday, March 20 – **7:30 p.m.**

Tickets: _____ Adult (\$10) _____ Student/Senior (\$8) \$ _____

Sunday, March 21 – **5:00 p.m.**

Tickets: _____ Adult (\$10) _____ Student/Senior (\$8) \$ _____

Children's Event

Sunday, March 21st - **2:00 p.m.** lunch & ticket, # Tickets (\$12) _____ = \$ _____

(both child and adult must purchase a ticket) Total : \$ _____

Method of Payment

Check Enclosed

Credit Card - Visa MasterCard

Credit Card #: _____ Expiration Date _____

Credit Card Billing Information (if different than above address.)

Name, Address, City, State, Zip, Phone _____

You may drop off this form in the main office or send with a SHG student. If you prefer to mail the form, please send to SHG Choral Music Department, 1200 West Washington Street, Springfield, IL 62702.