



Dance Will Take You To The Stars! American Dance Troupe Ticket Order Form – 2018 Season

Dancer’s Name(s) _____

Parent’s Name _____ Phone _____

Performance Dates and Times **# of Tickets**

Saturday, January 13	4 :00 PM	_____
Saturday, January 13	8:00 PM	_____
Sunday, January 14	2:00 PM	_____
Sunday, January 14	6:00 PM	_____

*Please make note by performance if you need handicap seating

Total Number of Tickets Ordered _____ **X \$15 = \$** _____ **Due**

- Please complete printed form and return it with a check for the total amount due in an envelope marked “ADT TICKET ORDER”. (There is an ADT mailbox located at the Krupinski Academy reception desk.)
- Checks should be made payable to: **American Dance Troupe.**
THERE ARE NO REFUNDS OR EXCHANGES!!!!
- Advance ticket orders are filled as they are received and must be in the ADT mailbox by **Sunday, December 17.**
- Any remaining tickets will be available for purchase 30 minutes prior to each show for \$20.
- E-mail Ann Rhomberg, annrtickets@gmail.com with any questions. Thank you!

Office Use: Check # _____ Amount _____ Received Date _____