

Jenny's Dance Centre

P.O. BOX 6564
LIBERTYVILLE IL 60048
Fax 847-295-9436

Recital 2010 Ticket Sale Please return this form by April 23, 2010

Name _____

Address _____

_____ Phone _____

- ◆ Tickets are \$20 each, children and adults. These fees offset the many costs of the recital, including auditorium rent for the whole recital week and wages for its professional crew.
- ◆ Tickets will be distributed on a **first come – first served** basis.

Friday, June 18 6:30 p.m. Show Ticket Request

Please indicate by number for each category:

_____ Tickets for wheelchair

_____ Tickets physical limitation (aisle seat)

_____ Tickets for Costume Change

_____ Best Available/No Special Needs

Saturday, June 19 2:00 p.m. Show Ticket Request

Please indicate by number for each category:

_____ Tickets for wheelchair

_____ Tickets physical limitation (aisle seat)

_____ Tickets for Costume Change

_____ Best Available/No Special Needs

Ticket Total

Saturday _____ X \$20 = _____

Sunday _____ X \$20 = _____

Total Authorized Amount _____

You may pay by: Discover MC Visa Check (\$25 fee for returned checks)

A 3% processing fee will be added to credit and debit card payments.

Account Number _____ - _____ - _____ / _____ Exp. Date _____ 3-digit security code _____

Authorized Signature _____ Date _____

Jenny's Dance Centre tries with every effort to fulfill all requests for tickets and/or seating. Because of the limited number of seats, we cannot guarantee your request will be met. Thank you for your understanding.

**Ticket Sales are final, no refunds or exchanges
Please return this form by April 23, 2010**