

Ticket Order Form

Ticket Purchase

	Show Title & Date	# Gen tix	# Sr tix	#<30	#Young Rep	Total
1	_____					
2	_____					
3	_____					

Tuition Purchase

	Class Title	Recipients Names	Tuition Total
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

Gift Certificate

Name of recipient _____ \$ amount _____

Name of recipient _____ \$ amount _____

Name of recipient _____ \$ amount _____

Total Purchase Amount _____

Name _____

Address _____

City/State/Zip _____

Phone: _____ Email _____

Please send to above address Please hold at theater for pick up

Payment (please circle) Check: Make payable to Cinnabar Theater (mail order or walk-in only)

Visa/MC: _____ Exp: _____ CVV _____

Signature _____

Send to: Cinnabar Theater
3333 Petaluma Blvd N., Petaluma, CA 94952
Fax to: 707.763.8929 or call: 707.763.8920