RESERVATION FORM

Ticket Cost

verett Performing Arts Center	Quantity x	Price =	= Ticket pr		rvice Fee = Tc	
710 Wetmore Ave, Everett, WA 98201				(if ap	(if applicable)	
Friday, December 13th						
10am 12pm		_ X	=	+	=	
Edmonds Center for the Arts 10 4th Ave N, Edmonds, WA 98020	Quantity x	Price =	= Ticket pr		rvice Fee = Tc plicable)	
Thursday, December 19th		V	_	I	_	
10am 12pm		_ X	=	+	=	
Friday, December 20th		Y	_	+	=	
		_ ^		I	—	
Payment: Orders of 20 seats or less pay in full. Orders of OVER 20 seats require \$150 deposit. Remair	ning balance due i	10 days pri	or to show.			
Check Enclosed (Please make payable	e to Olympic E	Ballet Th	eatre)			
Credit Card (Visa and Mastercard acc	epted)					
Card Number:	-		_ Exp. Date:	:CVC:		
Name:						
Billing Address:						
City:	Sta	te:	Zi	p:		
Phone:						
Signature:						
school/Group Info:						
•	School District:					
	Grades Attending:					
School/Group Address						
City:						
Email:						
Phone:						
We will arrive by \Box Car						
pecial Needs: Do any students, teachers, c accomodations for wheelchairs, hearing ir						
o reserve seats, mail form with paymen lympic Ballet Theatre ttn: Group Matinees	t to:		Or Contact directly: Phone: 425-774-7570 Email: dance@olympicballet.org			

errormances are just over one nour, appropriate for all ages, and include an intermission segment, Introduction to the Magic of Theatre, a demonstration of scenery, costumes, lighting, masks, and props.

No tickets are mailed out. When form is recieved you will recieve an emailed invoice with your seat numbers and payment confirmation. For additional seat requests, please call 425-774-7570.

Ticket orders are **non-refundable**, except in cases of show cancellations.

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