SCOUT ORDER FORM



GROUP NAME AND CONTACT			
MAILING ADDRESS			
CITY, STATE, ZIP			
DAYTIME PHONE NUMBER			
EMAIL ADDRESS			
Deadline for Scout Orders - February 3, Prices below reflect \$3.00 facility fee pe Scout pricing not available for Gold Circ	er ticket.	nuary 22, 2016 will b	e held at Will Call.
Scout discount available for below show	vtimes. Please place an X by	desired show date/ti	me.
Friday, February 5 at 7:30 pm Saturday, February 6 at 2:00 pm Saturday, February 6 at 7:30 pm			
	# OF TICKETS	X \$23.00 =	= <u>\$</u>
		HANDLING FEE	\$5.00
	TOTAL TICKETS	TOTAL	\$
Do you require wheelchair accessible or limited mobility seating? YES NO # of Wheelchair Accessible seats # of Limited Mobility seats			
If ADA seats are not purchased with the		-	
A maximum of 3 companion seats may be purchased with each wheelchair accessible or limited mobility seat while available.			
# of Wheelchair Accessible companion seats # of Limited Mobility companion seats			
For questions, please call 757-838-5650 Out of state orders must be picked up a	= :		and credit card.
Payment by Cash: Bring order form to the Hampton Colise	ım Box Office Monday - Frid	lav 10:00am - 5:00nm	
-		ay 10.00am 5.00pm	•
Payment by Money Order or Cashier's Check: Mail payment along with order form to: Hampton Coliseum Box Office 1000 Coliseum Drive			
Hampton, VA 23666			
Payment by Credit Card (Mastercard or Visa): Fax Order to 757-838-1814			
To confirm receipt of your fax and order call: 757-838-4203			
Name on Card			
Billing Address			
Credit Card Number			
Expiration Date			
Phone Number of Card Holder Signature of Card Holder			
Signature or cara noticer			