## GROUP ORDER FORM (FULL PRICE, EVENINGS)

GROUP NAME AND CONTACT



MAILING ADDRESS							
CITY, STATE, ZIP							
DAYTIME PHONE NUMBER							
EMAIL ADDRESS							
Deadline for Group Orders -November 27, 2025. Tickets will be m Tickets will be held at Will Call for orders placed <u>after</u> November Minimum group order is 10 tickets. Prices below reflect \$4.50 facility fee per ticket. Group pricing not available for Premium Seating. Is this a military group? YesNO							
Please place a check mark by desired show date/time.							
Thursday, December 11 at 7:00pm Friday, December 12 at 7:00pm Saturday, December 13 at 7:00pm		Prices listed	below are availa	blo wbilo	cumplies las		
		riices listeu	below are availa	bie willie	supplies las		
ONLY AVAILABLE THURSDAY							
	# OF TICKETS	<del></del> -				<del></del>	
	# OF TICKETS # OF TICKETS		X \$54.00 X \$48.50	= \$			
	# OF TICKETS		X \$43.00	= \$		_	
	# OF TICKETS		X \$37.50			_	
ONLY AVAILABLE FRIDAY & SATURDAY			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>*</u>		<del>_</del>	
	# OF TICKETS		X \$114.50	= \$			
	# OF TICKETS						
	# OF TICKETS		X \$54.00	= \$		<u> </u>	
	# OF TICKETS		X \$48.50	= \$		<u> </u>	
			Handling Fee	\$6.0	00	_	
			TOTAL	. \$			
Do you require wheelchair accessible or limited mobility seating?		# of Lin	nit YES	·	_ NO		
# of Wheelchair Accessible seats							
If ADA seats are not purchased with the group order, there is no part of a companion seats may be purchased with each each each each each each each eac				companie	on seats		
# of Wheelchair Accessible companion seats							
For questions, please call 757-838-5650 ext. 68943 or email group: Out of state orders must be picked up at the Hampton Coliseum   Group orders will be accepted by fax or ground mail. EMAILED GR	Box Office with phot	to ID and credit card.					
Payment by Money Order or Cashier's Check:		Mail novement along w	th order form t				
Mail payment along with order form to : Hampton Coliseum Box Office 1000 Coliseum Drive Hampto <u>n, VA 23666</u>							
Payment by Credit Card (Mastercard or Visa): Fax Order to 757-8 Signa	338-1814 ture of Card Holder						
	Name on Card						
	Billing Address						
Phone Nur	nber of Card Holder						
	Credit Card Number						
·	Fxpiration Date						

Prices are subject to change. Please allow 48-72 hours for orders to be processed before calling the Box Office.

To confirm receipt of your fax and order call: 757-838-4203. Receipts for group orders are printed with the tickets.

