## **GROUP ORDER FORM (FULL PRICE, AFTERNOON)**



**GROUP NAME AND CONTACT** 

MAILING ADDRESS						
CITY, STATE, ZIP						
DAYTIME PHONE NUMBER						
EMAIL ADDRESS						
Is this a military group? Y/N Deadline for Group Orders - April 5, 2024 a Tickets will be held at Will Call for orders pl Minimum group order is 10 tickets. Prices below reflect \$4.50 facility fee per tic Group pricing not available for Premium Se	aced <u>after</u> March 29,		orders plac	ced <u>befo</u>	<u>re</u> March	29, 2024 by 4pm.
Group discount available for below showtin Please place an X by desired show date/tim		ased on ava	ilability on	a first co	ome, first	served basis.
Saturday, April 20, 2024 at 1:00 pm Sunday, April 21, 2024 at 1:00 pm		- -				
	Prices I	listed below	are availabl	e while s	upplies las	t.
	# OF TICKETS	х	\$92.50	= \$		<u> </u>
	# OF TICKETS		\$76.00	= \$		<u></u>
	# OF TICKETS	х х				
	# OF TICKETS					
	# OF TICKETS	x	\$43.00	= \$		_
	# OF TICKETS	x	\$37.50	= \$		_
	# OF TICKETS	х	\$32.00	= \$		<u> </u>
	# OF TICKETS	x	\$26.50	= \$		_
		HAI	NDLING FEE		0	
						_
Do you require wheelchair accessible or limit	ted mobility seating?		YES		_ NO	
# of Wheelchair Accessible seats	+	# of Limite	d Mobility s	eats		
If ADA seats are not purchased with the group A maximum of 3 companion seats may be purchased with the group and the group are group as a seat of the group or group and the group orders will be accepted by fax, group and the group orders will be accepted by fax, group and the group orders will be accepted by fax, group and the group orders will be accepted by fax, group and the group orders will be accepted by fax, group and the group orders will be accepted by fax, group and the group orders will be accepted by fax, group and the group orders are not provided the group orders	on seats 68943 or email group Hampton Coliseum Hampton in person	heelchair a # of Limite osales@har Box Office	ccessible or d Mobility of npton.gov	limited compani	mobility so on seats credit care	eat while available.
Payment by Cash: Bring order form to Hampton Coliseum Box (	<del></del>	ay 10:00am	- 4:00pm.			
Payment by Money Order or Cashier's Chec	:k:					
- 1,	Mail payment a Hampton Colise 1000 Coliseum I Hampton, VA 2	eum Box Of Drive		0:		
Payment by Credit Card (Mastercard or Visa	•		EMAILED G	ROUP O	RDERS AR	E NOT ACCEPTED.
Name on	Card					
Billing Add	lress					
Credit Card Nun	nber					
Expiration	Date					
Phone Number of Card Ho						
Signature of Card Ho	ılder					

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.

No exchanges or refunds. Artists subject to change. EMAILED GROUP ORDERS ARE NOT ACCEPTED. Terms and conditions apply.