SCOUT ORDER FORM



GROUP NAME AND CONTACT					
MAILING ADDRESS					
CITY, STATE, ZIP					
DAYTIME PHONE NUMBER					
EMAIL ADDRESS					
Deadline for Group Orders - January 15, 2018. Tickets will be held at Will Call for orders placed Minimum group order is 15 tickets. Prices below reflect \$3.50 facility fee per ticket. Group pricing not available for Premium Seating	d <u>after</u> January 5		lers placed <u>l</u>	pefore January 5, 2	!018 by 5pm.
Friday, January 19 at 7:00 pm					
	Prices listed below are available while supplies last.				
# O	F TICKETS	x	\$23.50	= \$	_
# 0	F TICKETS	x	\$19.50	= \$	_
		HAN	DLING FEE	\$5.00	
			TOTAL	\$	<u>-</u>
Do you require wheelchair accessible or limited i	mobility seating?		YES	NO	
# of Wheelchair Accessible seats		# of Limited	l Mobility se	ats	
If ADA seats are not purchased with the group of A maximum of 3 companion seats may be purchased # of Wheelchair Accessible companion seats for questions, please call 757-838-5650 ext. 689	ased with each w eats	/heelchair a	ccessible or l		
Out of state orders must be picked up at the Ha	_		-	ID and credit card	
Payment by Cash:	•				
Bring order form to the Hampton Coliseum Box (Office, Monday -	Friday 10:00	0am - 5:00pr	n.	
Payment by Ivioney 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			
Name on Card					_
Billing Address	i				
Credit Card Number					
Expiration Date					
Phone Number of Card Holder	•				
Signature of Card Holder	•				

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.