

Musical Theatre Orange County
Ticket Order Form

For more info call 714-637-9763 or visit www.mtoc.org



Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ E-mail: _____
 Credit sale to the following Cast Member: _____



Select performance date & time, specify number of tickets and calculate totals. All seats are reserved.

Friday, July 23 @ 7:30 pm

_____ Tickets (after 7/13) x \$18 = _____
 _____ Presale Tickets (on/before 7/13) x \$15 = _____

Saturday, July 24 @ 7:30 pm

_____ Tickets (after 7/15) x \$18 = _____
 _____ Presale Tickets (on/before 7/15) x \$15 = _____

Sunday, July 25 @ 2:00 pm

_____ Tickets (after 7/15) x \$18 = _____
 _____ Presale Tickets (on/before 7/15) x \$15 = _____

Friday, July 30 @ 7:30 pm

_____ Tickets (after 7/20) x \$18 = _____
 _____ Presale Tickets (on/before 7/20) x \$15 = _____

Saturday, July 31 @ 7:30 pm

_____ Tickets (after 7/21) x \$18 = _____
 _____ Presale Tickets (on/before 7/21) x \$15 = _____

Sunday August 1 @ 2:00 pm

_____ Tickets (after 7/22) x \$18 = _____
 _____ Presale Tickets (on/before 7/22) x \$15 = _____

Total #	*Credit Card Fee
Tickets _____	(\$1 per Ticket) _____

Grand Total _____

**A fee of \$1 per ticket will be charged on all credit card orders.*

Ordering Information

Please mark desired performance dates, ticket quantities and amounts at right. All seats are reserved, order early for best seating. No refunds or exchanges. Tickets will be held at Will Call.
 --If you would like your tickets mailed to your home, please enclose a SELF-ADDRESSED, STAMPED ENVELOPE.

We accept CASH, CHECK, VISA and MASTERCARD. Additional fee of \$1 per ticket for orders paid by credit card.

GROUP SALES – We offer discounted ticket prices of \$12 for groups of 20 or more. Group sales must be made in advance, by calling us at **714- 637-9763.**

Please make checks payable to:
Musical Theatre Orange County

Our Mailing Address:
2034 E. Lincoln Ave. #303
Anaheim, CA 92806-4101

Thank You!

Select Payment Method:

- Cash Check
 Visa MasterCard

Card Number _____ - _____ - _____ - _____ **Exp:** _____ - _____

Name (as it appears on card): _____

Address _____ City _____ St _____

Zip _____ Phone _____