

Group Ticket Order Request Form

GROUP NAME _____

CONTACT PERSON _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DAY PHONE _____ I can be reached at this number Monday-Friday from 9:00 am to 5:00 pm

EMAIL _____

PERFORMANCES To place a group reservation, write in the name, date, and time of the show in the spaces provided below. Some events have more than one performance; please double check event date and time when ordering.

_____ Show _____ Date _____ Time _____
of seats _____

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of seats _____

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of seats _____

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of seats _____

_____ Show _____ Date _____ Time _____
of seats _____

SEATING Please request either **PRIME** or **SIDE** seating. See the seating chart on the left for more details.

For **PRIME** seating preference:

MAIN FLOOR

STADIUM Not wheelchair accessible

For **SIDE** seating preference:

WINGS 20 max. per side

MEZZANINE 17 max. per side

BALCONY 20 max. per side

SPECIAL NEEDS Wheelchairs, walkers, etc. _____

We may need to divide your group into different sections in order to accommodate special seating needs.

ADDITIONAL INFORMATION

We will be arriving by bus. Please add a free ticket for our driver. Limit one per show; not included in group minimum of 20.

We will be arriving by car.

My Group is tax-exempt. Tickets are NOT being purchased by individuals attending the show.

Copy of State of Wisconsin Sales & Use Tax Exemption Certificate enclosed.

Please call me about renting a private room before or after the performance.

I understand that this is an order **request** and may only be filled if tickets are still available to the chosen performance(s).

If I do not receive confirmation from the Schauer Center it is my responsibility to contact the Schauer Center to ensure the receipt of my request.

The submission of this request does not constitute a contract on the part of the Schauer Center.

SIGNATURE

DATE

My \$150 non-refundable deposit (per performance) is enclosed. Make checks payable to 'Schauer Center' or provide credit card information.



CC # _____ - _____ - _____ - _____

Exp. Date ____ / ____ / ____

please circle CC type

147 N. Rural Street, Hartford WI 53027 · Phone 262-670-0560, EXT. 0 · Email info@SchauerCenter.org · Fax 262-670-0937

Please make a copy of your reservation form for your records before mailing it in. Group tickets are not available online.