

MAIL/FAX TICKET ORDER FORM**PURCHASER**

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

EMAIL: _____

EVENT NAME(S): _____

SEATING NEEDS/REQUESTS (e.g. wheelchair accessible, aisle seats): _____

CHOICE	DATE/TIME OF SHOW	# OF TICKETS	PRICE PER TICKET	SERVICE FEE	LINE TOTAL
1				\$8.00/ticket	\$
2				\$8.00/ticket	\$
3				\$8.00/ticket	\$
TOTAL:					\$

Ticket prices & availability can be found at www.HennepinTheatreTrust.org.**PAYMENT**

CARD TYPE:

- Visa
 Mastercard
 Discover
 American Express

CARD NUMBER: _____

EXPIRATION DATE: _____

ZIP CODE: _____

SIGNATURE: _____

DELIVERY METHOD

- Mail tickets to the above address
 I'll pick up the tickets at the Box Office
 Send mobile tickets as a text message to the above phone number
 Send mobile tickets as an email to the above email address

SEND THIS COMPLETED ORDER FORM

BY MAIL: State Theatre Box Office
805 Hennepin Ave
Minneapolis, MN 55403

BY FAX: 612.252.0601

Your request will be filled based on the seats available when the order is received. If you have any questions, please contact the box office at 612.339.7007.