

THEATRE TICKET AUTHORIZATION FORM

NAME OF SHOW _____

DATE OF PERFORMANCE _____

TIME OF PERFORMANCE _____

AUTHORIZATION OF CREDIT CARD CHARGES: I AUTHORIZE MY
(CIRCLE ONE) VISA, MASTERCARD, AMERICAN EXPRESS,
DISCOVER CREDIT CARD

EXP. DATE _____

TO BE CHARGED \$ _____.

I AM AWARE THAT THE ABOVE CHARGES ARE FOR TICKETS

WITH A FACE VALUE OF \$ _____ EACH, WITH AN

ADDITIONAL CHARGE OF \$ _____ PER TICKET IN

COMMISSIONS, ADDITIONAL CHARGES, AND HANDLING FEES
FROM THE SELLER AND TICKET BROKER.

AUTHORIZED SIGNATURE

DATE _____

ADDRESS OF
CARDHOLDER _____

PHONE NUMBER OF
CARDHOLDER _____