

B A L L E T
 B A L L E
 B A L L
 B A L
 B A
 B C

GROUP SALES FORM

CHOOSE YOUR PERFORMANCE:

- | | | | |
|-------------------------|--|--|---|
| | THURSDAY | FRIDAY | SATURDAY |
| Program 1 | <input type="checkbox"/> November 2, 2017 | <input type="checkbox"/> November 3, 2017 | <input type="checkbox"/> November 4, 2017 |
| Romeo and Juliet | <input type="checkbox"/> February 22, 2018 | <input type="checkbox"/> February 23, 2018 | <input type="checkbox"/> February 24, 2018, 2pm <input type="checkbox"/> February 24, 2018 |
| Program 3 | <input type="checkbox"/> May 10, 2018 | <input type="checkbox"/> May 11, 2018 | <input type="checkbox"/> May 12, 2018 |

All performances at 8pm, with a matinee performance for *Romeo and Juliet* on February 24 at 2pm.

| | | | | | |
|-----------------------------|----------------|---------------|---------------|---------------|---------------|
| | PREMIER | ZONE A | ZONE B | ZONE C | ZONE D |
| GROUP TICKET PRICES* | \$90 | \$75 | \$60 | \$40 | \$35 |

The Nutcracker

- | | | |
|--|--|--|
| THURSDAY | FRIDAY | SATURDAY |
| <input type="checkbox"/> December 28, 2017, 7:30pm | <input type="checkbox"/> December 29, 2017, 7:30pm | <input type="checkbox"/> December 30, 2017, 2pm |
| SUNDAY | | <input type="checkbox"/> December 29, 2017, 7:30pm |
| <input type="checkbox"/> December 30, 2017, 2pm | | |

| | | | | | |
|-----------------------------|---------------|---------------|---------------|---------------|---------------|
| | ZONE A | ZONE B | ZONE C | ZONE D | ZONE E |
| GROUP TICKET PRICES* | \$85 | \$65 | \$55 | \$40 | \$35 |

*Group prices are per ticket and do not include the \$6 service charge or the \$2.75 facility fee.
 Group prices are not to be combined with any other offer. Subject to change.

Total # of Seats: _____
 (You receive 1 free seat for every 10 purchased)

Preferred Seating Location: _____
 (Please indicate if you prefer Orchestra, Mezzanine, Balcony, aisle seats, etc.)

of seats that must be together: _____
 (Eg. Pairs ok, Must be in one block, or Best Available etc.)

Total Seats # tickets x \$ _____ = \$ _____
 50% Deposit - upon booking: \$ _____
 Balance Due - three weeks before the performance: \$ _____

Credit Card Type: VISA MasterCard American Express

Card Number: _____
expiry

B A L L E T
B A L L E
B A L L
B A L
B A
B C

CONTACT INFORMATION

Group Leader name: _____

Phone number: _____
Daytime phone Cell phone

Address: _____
City Province Postal Code

Email: _____

Complete this form and send to:
Audience Services, Ballet BC
601 Smithe Street, Vancouver, BC V6B 5G1
Email: audienceservices@balletbc.com
Fax: 604.732.4417

*Note: Ballet BC will be in contact to confirm your tickets.