

Ticket Booking Form

First Name: _____ Surname: _____

Mailing Address: _____

Suburb: _____ Postcode: _____

Phone (wrk/mob): _____ Phone (hm): _____

Performance: _____

Date: _____ Time: _____

Tickets Required:

_____	x	Adult	@	\$ _____	\$ _____
_____	x	Concession	@	\$ _____	\$ _____
_____	x	Child	@	\$ _____	\$ _____
_____	x	Family	@	\$ _____	\$ _____
_____	x	Group	@	\$ _____	\$ _____
		Service Fee:			\$ 5.00
		TOTAL DUE:			\$ _____

Charge \$to my Mastercard / Visa

Card Number : _____ / _____ / _____

Expiry Date: _____

Card Holder's Signature: _____

Refunds/Exchanges: there are normally **No Refunds or Exchanges** available other than in the event of a cancellation to the programme.

No information collected from this form will be passed on to any other organisation.

Please add my name to the Nambour Civic Centre list for advanced information: Yes No

Please complete this form and return to Nambour Civic Centre:

Mail: PO Box 590, Nambour 4560

Fax: 07 5475 7766

Email: namcc@sunshinecoast.qld.gov.au