



NAME:

EMAIL:

TICKETS ORDER FORM

THURSDAY Nov 12, 2009 7:30 pm		NUMBER of TICKET (s)	PRICE PER TICKET	TOTAL	RESERVED
	ADULT			@ \$16	\$
STUDENT			@ \$11	\$	

FRIDAY Nov 13, 2009 7:30 pm		NUMBER of TICKET (s)	PRICE PER TICKET	TOTAL	RESERVED
	ADULT			@ \$16	\$
STUDENT			@ \$11	\$	

SATURDAY Nov 14, 2009 7:30 pm		NUMBER of TICKET (s)	PRICE PER TICKET	TOTAL	RESERVED
	ADULT			@ \$16	\$
STUDENT			@ \$11	\$	

SUNDAY Nov 15, 2009 2:00 pm		NUMBER of TICKET (s)	PRICE PER TICKET	TOTAL	RESERVED
	ADULT			@ \$16	\$
STUDENT			@ \$11	\$	

PAIEMENT INCLUDED:

- CHECK: \$ _____
 CASH: \$ _____
 CHECK & CASH:
 _____ / _____

TOTAL of
TICKET(S)
ORDERED

TOTAL:

Make check to CATHEDRAL HIGH SCHOOL.

**All sales are FINAL .
NON-REFUNDABLE
NON-EXCHANGEABLE**



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