

Box Office Information Form

Presenter Name:

Presenter Email:

Name of Event:

Date of Event: Time

Date of Event: Time

Tickets on Sale by (Date):

Ticket Prices:

Full

Concession/Student/Senior

Friend of the Theatre

Child 12 yrs or under

Group 10+

Person authorised to obtain box office reports:

What are the sales restrictions? *(No children, Over 18 only)*

What merchandise will you be selling? *(Programmes, CD's)*

Additional information or special requirements:

