

FESTIVAL TICKET REQUEST FORM



Festival of Church Music
Morton H. Meyerson Symphony Center
Dallas, Texas
October 13, 2019 - 7:00 pm

FIRST NAME: _____ LAST NAME: _____ TEL: (____) _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP CODE: _____
 CHURCH & CITY: _____
 E-MAIL: *(please print neatly)* _____

TICKET REQUEST:

of tickets at \$20.00 each (Orchestra Floor & Terrace)..... _____ x \$20.00 = \$ _____

of tickets at \$10.00 each (Grand Tier Boxes): _____ x \$15.00 = \$ _____

of tickets at \$15.00 each (Dress Circle):..... _____ x \$10.00 = \$ _____

of tickets at \$10.00 each (Grand Tier):..... _____ x \$10.00 = \$ _____

of tickets for children (free with purchase of 2 adult tickets)..... _____ x -0- = \$ _____ 0 _____

DONATION:

Your tax-deductible donation is appreciated. Your name will appear in the Program Book. \$ _____

TOTAL CHECK ENCLOSED: \$ _____

COMPLETE THIS FORM...

- Checks payable to “Church Music Institute”
- Mail to:

Church Music Institute
 8100 Lomo Alto Drive, Suite 260
 Dallas, TX 75225

