

Your Name _____



After February 1 you may mail or hand into CS office

(hours...M-Th 3:30-7:30)

1701 Eyelet Rd., Dixon 61021
centerstagedixon@comcast.net
815-284-6489

We will process your order & email you when tickets are ready to be picked up.

Tickets may be purchased in CS office **AFTER April 1st.**

Please be sure you know which show your dancer is in and what side of stage your dancer will perform on!

Saturday, Apr. 21-6:30 p.m.

How Many Tickets ?

Main Center _____ x\$15 = _____

General _____ x\$10 = _____

Total cost \$ _____

Sunday, Apr. 22-1:00 p.m.

How Many Tickets ?

Main Center _____ x\$15 = _____

General _____ x\$10 = _____

Total cost \$ _____

Sunday, Apr. 22-4:30 p.m.

How Many Tickets ?

Main Center _____ x\$15 = _____

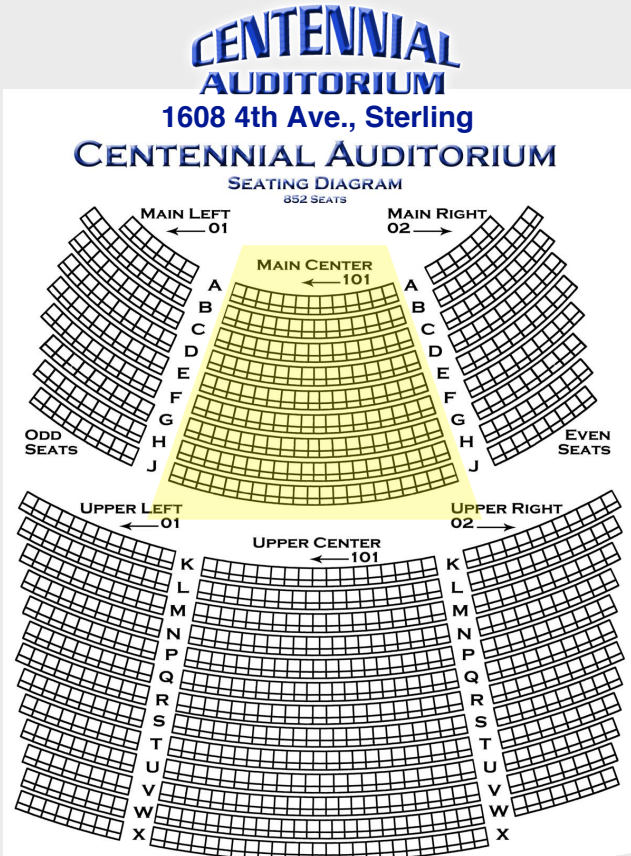
General _____ x\$10 = _____

Total cost \$ _____

*Please circle desired seating area on diagram
(1st & 2nd choice)*

We will get you as close as possible to your choice.

Performances are held at Sterling High School



Comments/Special Needs/Requests:

Dancer's Name _____

Your Name _____

Email _____

Phone _____

Address _____

City, State, Zip _____

Total enclosed \$ _____ check# _____

Date paid _____

ADDITIONAL 3% CHARGE FOR CREDIT CARD PAYMENTS

Name on Card _____

Card # _____

Exp. Date _____ Security code _____

Billing zip code _____

Signature _____