

## Défilé 2020 Ticket Lottery – PURPLE CONCERT – Sun, 5/24 @ 2:00 pm

- Défilé tickets are reserved seating and are assigned via a lottery. All tickets are \$13 each.
- Order forms may be submitted between **February 17<sup>th</sup>** and **March 21<sup>st</sup>** to be entered into the lottery.
- Drop off completed order forms during regular business hours only (Mon, Tues, Thurs 11-8; Wed 10-8; Sat 9-3).
- The deadline to drop off order forms for the ticket lottery is **Saturday, March 21<sup>st</sup> @ 3:00 pm**.  
Ticket order forms submitted after the deadline *will not be included in the lottery*.
- There is no limit to the quantity of tickets you are allowed to purchase. Order forms will be randomly selected & tickets will be assigned according to “best available seating” as each order is pulled. All audience members must have a ticket in order to enter the theatre, regardless of age.

### **HOW TO SUBMIT YOUR TICKET ORDER FORM**

- Submit separate order forms/payments for each color concert.
- Do not combine order forms or payments for multiple concerts!  
Combined orders will automatically be placed at the end of the ticket lottery process.
- Payment must be made either by **cash or check** (*made payable to Dancenter North*).  
**No credit card payments** will be accepted during the ticket lottery.
- Put this completed order form in an envelope marked with your child(ren)’s **FIRST & LAST** name(s) and the **COLOR OF THE CONCERT** for which you are ordering tickets.
- Your pre-paid tickets will be available for pick-up in the DCN office on Mon, March 30<sup>th</sup>.  
**We will not mail tickets to your home.**
- Additional tickets (if not sold out) may be purchased after the ticket lottery is complete.

### **PURPLE CONCERT – RESERVED SEATING TICKETS – \$13.00 each (no limit)**

QTY TICKETS \_\_\_\_\_ x \$13.00 = \_\_\_\_\_

STUDENT NAME(S) \_\_\_\_\_

PARENT/GUARDIAN NAME(S) \_\_\_\_\_

PHONE # \_\_\_\_\_

← Check this box if you have submitted order forms for multiple concerts

← Check this box if you need handicap-accessible seating (*please specify below*)

\_\_\_\_\_

#### **FOR OFFICE USE ONLY**

Total Tickets \_\_\_\_\_ Seat #s \_\_\_\_\_

Date \_\_\_\_\_ Total Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Invoice ID \_\_\_\_\_