

FOR TICKET OFFICE USE ONLY order checked by _____

I am a member of the Friends of Cain Park. DATE _____

Membership type: SINGLE FAMILY

YOU WILL GET THE BEST SEATS AVAILABLE AT THE TIME YOUR ORDER IS PROCESSED.
ORDERS WILL NOT BE PROCESSED WITHOUT A SERVICE FEE PAYMENT.

CAIN PARK 2019 TICKET ORDER FORM

NAME _____
PLEASE PRINT CLEARLY

ADDRESS _____

PHONE (____) _____ (____) _____
DAY EVENING

CITY _____ STATE _____ ZIP _____

FAX (____) _____ EMAIL _____

Use this section if you're eligible for DISCOUNT TICKETS —

Part I

Military ID (MIL); senior citizens (SEN) or students/children (STU); member of Friends of Cain Park (FCP) or WKSU (only for 6/13 Ani DiFranco, 6/14-30 RAGTIME, 6/18 Robert Cray/Marc Cohn, 7/24 Lyle Lovett, 8/10 Judy Collins). **TICKETS WILL BE HELD AT CAIN PARK PENDING PRESENTATION OF DISCOUNT ID CARD AND PHOTO ID.**

NO. OF TICKETS	EVENT & DATE	DISC. CODE	WHEELCHAIR SEATING?	TICKET PRICE	AMOUNT
	1.		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes," a Ticket Office staff member will call to discuss your special needs.</i>		\$
	2.				\$
	3.				\$
	4.				\$
	5.				\$
	6.				\$
	7.				\$
	8.				\$
	9.				\$
	10.				\$
	11.				\$
	12.				\$

Part I Subtotal \$

Use this section to buy ALL OTHER TICKETS —

Part II

Shows and events not eligible for discounts: 6/13 RAGTIME Preview, 7/25-27 THE LAST FIVE YEARS, 7/27 MultiMusic Fest, Wine Tastings, \$5 Movies. **INCLUDE SELF-ADDRESSED/STAMPED ENVELOPE WITH YOUR ORDER AND TICKETS WILL BE MAILED TO YOU.** Otherwise, your tickets will be at the "WILL CALL" area at the theater where you'll see the event. You must present a photo I.D. in order to pick up your tickets at Cain Park.

NO. OF TICKETS	EVENT & DATE	WHEELCHAIR SEATING?	TICKET PRICE	AMOUNT
	1.	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes," a Ticket Office staff member will call to discuss your special needs.</i>		\$
	2.			\$
	3.			\$
	4.			\$
	5.			\$
	6.			\$
	7.			\$
	8.			\$
	9.			\$
	10.			\$

Part II Subtotal \$

PAYMENT INFORMATION

Check/Money Order payable to CITY OF CLEVELAND HEIGHTS

VISA MasterCard Discover American Express

Card Expires / Security Code

NAME as it appears on card (PLEASE PRINT CLEARLY)

SIGNATURE (required for all ticket orders)

IMPORTANT!

YOUR ORDER WILL NOT BE PROCESSED WITHOUT IT IF MAILING OR FAXING ORDER.

I want to join Friends of Cain Park:

- Individual \$40
- Couple/Family \$50

Make check/money order payable to FRIENDS OF CAIN PARK. Membership payment needs to be made separately from payment for tickets.

Ticket Total: \$

→ Add Service Fee: \$
\$2 per ticket (\$10 maximum)

GRAND TOTAL: \$

Mail to: CAIN PARK TICKETS, 40 Severance Circle, Cleveland Hts., OH 44118 or fax to 216-371-6995 as of 6/4/19

FOR TICKET OFFICE USE ONLY		Date Mailed
Date Received _____ BY _____		_____
Date Processed _____ BY _____		BY _____
ACCT # _____		