

CABARET TICKET BOOKING FORM

Please return to Student Services or email form to admin@endeavour.sa.edu.au

YOUR NAME: _____

CONTACT PH NO. _____

We would like to buy _____ Adult tickets @ \$16 per ticket.

We would like to buy _____ Concession tickets @ \$13 per ticket
(please note that performers do not need a ticket)

For those who wish to book a whole table, tables seat a maximum of 8 people.

Please note that any food and drinks that you wish to consume during the evening (including alcoholic) need to be provided by you.



**ENDEAVOUR
COLLEGE**

LIFE AND COMMUNITY IN CHRIST

PAYMENT

- I would like to pay by credit card:
(Please fill out details below)

Amount: \$ _____ Master Card / Visa (please circle one)

Name on Credit Card: _____

Card Number: _ _ _ _ / _ _ _ _ / _ _ _ _ _ _ _ _

Expiry Date: _ _ / _ _ Verification Number (CCV): _ _ _ _

OR

- I would like to pay by cheque and have enclosed one OR
- I would like to pay by cash and will give it to Reception directly.
**Please note that your tickets are not guaranteed until they have been paid for.*

SIGNED: _____

Your tickets will be distributed to you via post or your child's Care Group prior to the event.
Please write the name of each person that you are buying a ticket for:

In order to help us with organising seating (particularly if you are not booking a whole table), please indicate any other families with whom you would like to share a table (if any).

Any other requests:

If your child's class or extra-curricular ensemble(s) are performing in the Cabaret, please fill out the following section:

STUDENT NAME: _____

- Yes, my son/daughter will be at the Cabaret night.
- No, my son/daughter will not be at the Cabaret night because:
