

The Bands of Cathedral City High School
Jazz Band Dinner Dance Ticket Order Form
Gregory X. Whitmore, Director of Bands

Name _____
Date _____
Address _____
City _____ State _____ Zip _____

Telephone _____
Email _____

Dinner Dance Tickets: \$50.00 each
Quantity _____ Total Cost: _____

____ I would like to purchase an entire table (10 seats).
Total Cost: \$450.00 (With Table Purchase Discount)

____ Please mail my tickets to me at the above address.
____ I will pickup my tickets at Will Call at the Doral Resort on night of event.

Method of Payment
Cash _____
Check: _____
Credit Card: _____
 Type: _____
 Number: _____
 CVC: _____ (Last three numbers on right hand side of card on back)

Total Enclosed \$ _____

Orders must be paid for when form is turned in.
Make checks payable to CCHS Bands Boosters

OFFICE USE ONLY:
Items Received: _____
Date Paid: _____

