

Wicked! The Musical Registration Form

Name: _____

Address: _____

City: _____ ST _____ Zip: _____

Home Ph: _____ Cell Ph: _____

Work Ph: _____ E-Mail: _____

Chapter Name (If Applicable) _____

Wicked Date – Check One:

___ **Thurs, July 23, 2009** – 7:30 PM - Orchestra Rows 18 and 20 in the center

\$81.00/tkt # of tkt _____ Total = \$ _____

___ **Sun, July 26, 2009** – 7:30 PM – Orchestra Rows, 3 thru 7 off to the side

\$81.00/tkt # of tkt _____ Total = \$ _____

Check #: _____ Amt.: _____ Deadline: August 15, 2008

*The check for all shows must be made payable to me and sent to my address along with a **stamped, self-addressed envelope as well as the above completed form.** Janie Rausch, 1717 East Cielo Grande, Ave. Phoenix, AZ 85024*