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METHOD OF PAYMENT

Enclosed is my check made payable to Pittsburgh Ballet Theatre

Visa MasterCard Discover American Express

Card Number: _____ Expiration Date: _____

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Your credit statement or cancelled check will act as a receipt. Tickets will be mailed by September. For tickets, call 412.454.9107 or fax this form to 412.281.2202. All sales are final. No refunds. Programs, artists, and dates subject to change.

ORDER FORM

Package: _____ Day: _____

Price Section: _____ x Number of Seats _____ = \$ _____

Handling Fee \$ \$10

Number of Parking Passes at \$7 each \$ _____

Parking Handling Fee \$ \$5

Total \$ _____

Trim on dotted line and
mail with payment to:
Pittsburgh Ballet Theatre
2900 Liberty Avenue
Pittsburgh, PA 15201-1500