

B THEATRE BURLINGTON

NAME _____
 ADDRESS _____

Phone _____
 e-mail address. _____
 Postal code _____

	FRI.	SAT.	SUN	FRI.	SAT.	SUN.*	THURS.	FRI.	SAT
SHOW 1	Sept. 16	Sep.t 17	Mat	Sept. 23	Sept. 24	Mat	Sept. 29	Sept. 30	Oct. 1
SHOW 2	Feb. 3	Feb. 4	Feb. 5	Feb. 10	Feb. 11	Feb. 12	Feb. 16	Feb. 17	Feb. 18
SHOW 3	April 14	April 15	2.00 pm	April 21	April 22	2.00 pm	April 27	April 28	April 29

Season tickets are for the same night for all three shows .except February. Please enclose an addressed, stamped envelope with your order. All shows at 8.00pm. We can only provide matinee's in the Feb. slot at 2.00 pm
 ADULTS @ \$70.00 # _____ SENIORS \$60.00# _____ STUDENTS \$15.00 ___ Please make cheques payable to Theatre Burlington. Mail to - Tickets, 770 Drury Lane, Burlington L7R 2Y2

Cash
Cheque
Recd.
Filled

