

OXFORD HIGH SCHOOL CHOIRS
'70S MUSIC FEVER
TICKET ORDER FORM

Name _____

Email _____

Student Name _____ Choir _____

MAIN FLOOR RESERVED SEATING

	#TICKETS	COST		TOTAL
Wed May 8	_____	x \$10.00	=	\$_____
Thurs May 9	_____	x \$10.00	=	\$_____

Total Amount Paid: \$ _____

Requested Area: ___Left ___Center ___Right
 ___Best Available

Other requests: _____

Check if applicable:
Handicap___ Wheelchair___

**Please submit with payment
of cash or check made out to
Oxford High School**

___Cash
___Check (#_____)
Date _____