



FLORIDA A&M UNIVERSITY  
**ESSENTIAL  
 THEATRE**

# MORNING MATINEE RESERVATION FORM

Name of Production: \_\_\_\_\_

Date & Time of Performance: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City

State

Zip

Number of Students Attending: \_\_\_\_\_ x \$5.00 = \_\_\_\_\_

Number of Adults Attending: \_\_\_\_\_ x \$7.00 = \_\_\_\_\_

\_\_\_\_\_ x \$0.00 = \_\_\_\_\_

Note: Two (2) Chaperones per every twenty-five (25) persons will be admitted free.

Total amount due: \$ \_\_\_\_\_ (25% of the total is due when reserving seats.)

Method of payment:  Cash  Check # \_\_\_\_\_  Credit Card

\_\_\_\_\_ purchase order # \_\_\_\_\_

Make Checks payable to: The FAMU Essential Theatre

Mail to: 515 Orr Drive, Room 208, FAMU, Tallahassee, FL 32307

FOR MORE INFORMATION CALL THE BOX OFFICE (850) 561-2425 or Fax 561-2846

FOR BOX OFFICE USE ONLY

Amount of Deposit Received \$ \_\_\_\_\_ Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_

Balance Due: \$ \_\_\_\_\_

Balance Paid \$ \_\_\_\_\_ Method of Payment  cash  check  Credit Card

Date Balance Received \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_\_ Tickets were received \_\_\_\_/\_\_\_\_/\_\_\_\_ | \_\_\_\_\_ Tickets left for pick-up

Notes: