

Discovery Theater Group Sales Request Form (2016-2017)

Return via fax only: 202-633-1322

IMPORTANT! PLEASE READ BEFORE SENDING THIS FORM:

-We define a group as **10 or more children over the age of 2**. If you have a smaller group, please call us or go online to purchase tickets at the regular price.

-A credit card number is required on all forms. Requests without a credit card number will not be accepted.

-Groups of 10-19 children are required to pay in full at the time of reservation. The credit card will be charged upon receipt of your form.

-Groups of 100 children or more are required to make a 20% deposit via credit card at the time of reservation. The credit card will be charged for the deposit upon receipt of your form.

-Please use the notes section at the bottom to list additional performances, alternate dates/times, any special needs or interpreter requests that we should be aware of.

-Please allow up to 48 hours from the time of your request to receive confirmation of your order. This request does not guarantee your tickets. Do not assume you have tickets until you are faxed or emailed a confirmation. Your confirmation will include a total price and instructions for payment.

Group/School Name: _____

Group/School Address: _____

Business/School Phone: _____ Fax Number: _____

Contact Name: _____

Contact Email Address: _____

Emergency Phone/Cell (day of show): _____

Show Name: _____ Date: _____ Time: _____

Children: _____ # Adults: _____ Children's Age Range or Grade: _____

Credit Card #: _____ Expiration Date: ____/____/____

Security Code (3 digits): _____ Name on Card: _____

Would you like us to automatically charge the credit card on due date? _____YES _____NO

Your card will be charged today if you have less than 20 children OR if you are reserving for 100+ children (20% deposit). For all other reservations, the credit card is still required to hold your reservation but is not charged at this time.

Alternate date/time if 1st choice is not available: _____

Additional performances to book (dates/times): _____

Any Special Needs? (wheelchairs, interpreter, etc.): _____