DEPOSITED	#	CHARGE	D	MAILED
	Wednes 7:00 p.m.	MISS ALABAMA <u>SINGLE</u> TICKET ORD <u>tickets@missalabar</u> sday, June 28th through nightly – Samford Unive	ER FORM <u>na.com</u> Saturday, J ersity Wrigh	uly 1st t Center
		-	-	ay 9:00 a.m. to 2:00 p.m.
E-MAIL		CELL # ()	
Check # Cree	lit Card #			Exp:
WHEELCH	AIR & HAN	IDICAP SEATING		CVV Code
Please indicate if you need	special se	eating and you will be co	ntacted.	For Office Use
I need wheelchair seatingI need handicap seating			Date received:	
				Checks: \$
		SINGLE NIGHT TICKE	<u>IS ONLY</u>	Cash: \$
	PRICE	<u>WED THU FRI</u> <u>No. Requested</u>	<u>TOTAL</u>	Credit: \$
Front Orchestra – Rows K-S	\$55		\$	For credit card orders:
Back Orchestra – Rows T-EE	\$50		\$	E-mail to tickets@missalabama.com
Grand Tier Arms – Rows A-L	\$50		\$	For checks, please mail to: Miss Alabama Organization
Grand Tier – Rows M-S	\$50		\$	2809 Crescent Avenue Suite 2
Balcony – Rows T-FF	\$45		\$	Birmingham, AL 35209
	<u>:</u>	<u>SATURDAY NIGHT FINALS</u> <u>No. Requested</u>	<u>TOTAL</u>	Make checks payable to: Miss Alabama Organization
Front Orchestra	\$75		\$	
Back Orchestra	\$65		\$	<u>Seated</u>
Grand Tier Arms	\$65		\$	
Grand Tier	\$65		\$	
Balcony	\$63		\$	
		Subtotal:	\$	
10% sales tax must be added to this subtotal: \$				
Handling - Cash or Check - OR -	(# of tick	xets X \$5)	\$	Picked up:
Handling - Credit Card	(# of tick	tets X \$10)	\$	Date:
		GRAND TOTAL:	\$	– Signed: