TICKET ORDER FORM

PLEASE NOTE: Students who are involved with the production are admitted free.
Children 2 and under are free

Student's Name: _____ 6th Hour Teacher: _____
(Please Print)

Purchaser's Name: _____

Thursday, December 4, 2025 7:00 p.m. Performance West High School Auditorium	**Friday, December 5, 2025 7:00 p.m. Performance West High School Auditorium**
____ Adult Tickets Purchased @ $10 each =_____	____ Adults Tickets Purchased @ $10 each =_____
____ Student Tickets Purchased @ $8 each =_____	____ Student Tickets Purchased @ $8 each =_____
☐ **Cash payment in the amount of $_____ is enclosed**	
☐ **Check # _____ in the amount of $_____ is enclosed**	

(Office Use Only)

I have received my tickets.

Student Signature: _____ Date: _____