



Ticket Order Form – Group Sales
52nd Annual Indiana Flower & Patio Show
March 13th – 21st, 2010

Show admission tickets are available to groups of 15 or more at a special rate of \$8.00 each. General admission tickets at the door are \$12.00. To take advantage of this special price, complete this order form and return it to us with full payment as soon as possible. You may also use this form to request promotional materials. To sell tickets on consignment, please complete the required information and return to our office, via mail or fax, to receive your tickets. Thank you in advance for your order!

******THE DEADLINE FOR ADVANCE PURCHASE IS FEBRUARY 19, 2010******

(Please Print)

Group/Company Name: _____

Contact Person: _____ Phone No: _____

Address: _____

City: _____ State: _____ Zip: _____

Please mail the tickets and/or promo items to above address.

Please hold the ticket order at Will-Call (Show Office in the North Entrance of West Pavilion).

Tickets (Minimum order of 15 required for group rate price):

() **Advance Purchase** - Number of Tickets: _____ @ \$8.00 each = \$ _____

() **Consignment Sale** - Number of tickets requested: _____

By Signing below you agree to pay for tickets sold on consignment by or before 4/5/10. Payment must be mailed to our office with a copy of this form as well as any unsold tickets. If you happen to misplace any unsold tickets, you are responsible for payment of those tickets. You may NOT sell these tickets for more than the price stated on this order form. If you do not sell the required minimum of 15 tickets, you must then pay the general admission price of \$12 per ticket.

Signature: _____ Date: _____

Complete this section at the end of the consignment sale:

Actual Number of Tickets Sold: _____ @ \$8.00 each = \$ _____

Payment Method:

() Check Enclosed for Payment

Make check payable to: **HSI** Check # _____ Amount \$ _____

() Credit Card Payment - Circle One: VISA MC AMEX DISC Amount \$ _____

Account # _____ 3 dig code _____ Expires: _____

Billing Address: _____ Zip: _____

Signature _____

Please mail or fax this form to: HSI Show Productions, P.O. Box 502797, Indianapolis, IN 46250
PHONE: (317) 576-9933 or (800) 215-1700 FAX: (317) 576-9955