

Seat holder info: Please fill in or update this column: Last Name of Applicants: First Name Primary Applicant: Address: _____ Postal: _____ Home Phone: _____ E-Mail: _____ Cell Phone: _____ Business Phone: _____		Spouse info: Please fill in or update this column: Name of Spouse (if applicable): _____ Address [if different]: _____ Home Phone [if different]: _____ E-Mail: ○ _____ Cell Phone: _____ Business Phone: _____	
---	--	--	--

*In the boxes below, please indicate the type of ticket you wish to purchase:

1. Traditional – Adults & children 10 years and older
2. Educational Family Experience – with children of all ages

Adults (25 and over) – \$150

LAST NAME	FIRST NAME	Male/ Female	*Service (1,2)	COST

Children (2-11) – \$50 Young adults (12-24) – \$75

English Name(s)	Date of Birth	Age at Sept. 1 If under 16	School & Grade If under 16	Male/ Female	To be enrolled in Children's program (Yes or No)	COST
Children 2-11						
Young adults 12-24						
					*Service (1,2)	

AMOUNT DUE

Amount payable for Adult Tickets	tickets x \$150	\$
Amount payable for Young Adult's Ticket	tickets x \$ 75	\$
Amount payable for Children's Tickets	tickets x \$ 50	\$
TOTAL amount payable		\$

PAYMENT

- We wish to pay the total ticket amount due in full.
 We wish to pay by Cheque[s] attached Cash/ Debit VISA
 We wish to pay in 3 payments – September 1, October 1, and November 1, 2009)
 NSF/dishonoured cheques will be subject to a \$15 service charge

MASTERCARD

Credit Card payments are welcome but a charge of 2% will be added to offset our charges from the card companies.

Card Number _____ Expiry _____

Name on Card: _____ Date _____ Signature: _____