

Coastal Dance Company
presents
Atlantic Coast Academy of Dance
Spring Repertory Performance 2010
Saturday March 20 ~ 7:00 PM

Name _____ Telephone _____

Mailing Address _____

Email Address _____

Please mail my tickets _____ (if ordered before March 10th)

Please hold at box office _____ under the name of _____

All Seats are General Admission

_____ # Tickets x \$20.00 Adults

_____ # Tickets x \$15.00 Child (12 & under)

Total = \$ _____

Please make checks payable to **Atlantic Coast Academy of Dance**

or complete credit card information (VISA, MC – NO American Express or Discover):

Card Holder Name: _____ VISA ___ MC ___

Credit Card #: _____ CSV _____

Expiration Date: ____/____ (Month/Year) Billing Zip Code: _____

Send completed order form with payment to:

Coastal Dance Company, 49 John Maki Road, West Barnstable, MA 02668