

Date:

**Step 1: Contact/Billing Information**

Bill to: Contact Name: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Bill to: Company: \_\_\_\_\_ Phone:  -  -   
 Shipping Address: \_\_\_\_\_ Fax:  -  -   
 City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal:

**Step 2: Event Information**

(Leave any field blank if not applicable)

General Admission Event     Reserved Seating Event (Map required)    Facility Name: \_\_\_\_\_  
 Name of Event: \_\_\_\_\_  
 Location of Event: \_\_\_\_\_  
 Date of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_  
 Ticket Price: \_\_\_\_\_ Presented by: \_\_\_\_\_  
 Other Information: \_\_\_\_\_

Please include a graphic of a: \_\_\_\_\_

Please include a special graphic as emailed to [tickets@vtix.com](mailto:tickets@vtix.com) (digital format: black and white jpeg, gif, tiff, pdf, bmp)

**Step 3: Ticket Information**

Number of Tickets Required:  Starting Number:   
 Ticket Colour: (check one)     Red     Blue     Green     Violet     Yellow     Orange     Silver

**Step 4: Shipping Instructions**

Same as billing address     Tickets will be picked up     Please arrange delivery    Delivery Options:  
 Shipping Address: \_\_\_\_\_     Same day  
 City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal:      Overnight

**Step 5: Payment Instructions**

I will be paying by: (check one)     Visa     M/C     Cheque     Cash     Debit    (tickets must be paid in advance of shipment or at time of pickup)  
 Name on Card: \_\_\_\_\_  
 Card #:     Expiry Date: