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| **CONTACT DETAILS:** | | | | |
| Name: | | | Mobile: | |
| Postal Address: | | Email: | | |
| **RELAXED PERFORMANCE BOOKING FORM:**  **Tickets are $10 per person** *Please note this is also a schools show and will be New Zealand Sign Language Interpreted* | | | | |
| **EVENT** | **DATE & TIME (2018)** | **VENUE** | **NUMBER OF TICKETS** | **TOTAL COST**  **($10 EACH)** |
| ***Junk*** | Friday 9 March  Show starts at 11.30am | Bruce Mason Centre, Takapuna |  | $ |
| **TOTAL NUMBER OF TICKETS:** | | |  | **TOTAL COST:**  **$** |
| **YOUR REQUIREMENTS (PLEASE SELECT):** | | | | |
| I require wheelchair and companion seating  If YES, I understand that  these bookings will be sent to the Bruce Mason Centre for processing | | | YES / NO | |
| I would like to receive the Visual Story by email:  A social script is a document detailing what to expect from the performance and venue | | | YES / NO | |
| **PAYMENT (TICK ONE BOX):** | | **TICKET DELIVERY (TICK ONE BOX):** | | |
| Direct Credit/Bank Transfer  AAF will send you an invoice with the payment details and instructions to pay. If any issues arise, please e-mail [natasha.lay@aaf.co.nz](mailto:natasha.lay@aaf.co.nz) or call (09) 374 0339 **OR**  I enclose a cheque  (payable to **Auckland Festival Trust)** | | Box office collect (tickets will be at the venue box office 90mins before the performance starts)  **OR**  Email my tickets to the email address at the top of the form | | |