

Ticket Order Form for
FEAST OF FOOLS THEATRE's presentation of
"MURDER IN OLD ITALY"

NAME: _____

ADDRESS: _____

POSTAL CODE: _____ TEL. NO: _____

_____ regular tickets @ **\$42** (if purchased **before** Jan. 14) = \$ _____

_____ table of 8 @ **\$300** (if purchased **before** Jan. 14) = \$ _____

_____ regular tickets @ **\$48** (if purchased **after** Jan. 14) = \$ _____

_____ table of 8 @ **\$350** (if purchased **after** Jan. 14) = \$ _____

_____ Please hold my tickets at the door for pick up on show date

_____ Please mail my tickets to me. (*Please add \$1.00 handling fee*)

TOTAL: \$ _____

In order to secure your tickets, payment must accompany this form. Please make cheque payable to: FEAST OF FOOLS THEATRE. Please mail form and cheque to: Feast of Fools Theatre, 250 Scarlett Road, Suite 1913, Toronto, ON. M6N 4X5. If you would like your tickets mailed to you, please enclose a STAMPED, self addressed envelope. For more information please call Rob at 416-455-9038.