

Jazz Showcase Ticket Order Form

Multiple raffle baskets
will be available

Enjoy a evening of
great music,
dancing and dinner

Friday, May 4 and Saturday, May 5, 2018

Entertainment starts @ 5:30

Buffet dinner starts @ 6:30

Lincolnway-East Stage

There will be multiple raffles available each night.

There will be **reserved seating**. Tables seat a total of eight (8).

A buffet dinner, including a vegetarian and a gluten-free option, will be served. Beverages are included.

Please DO NOT order tickets for your student performer.

Student performers will be provided with a meal to be served separately in the cafeteria.

Questions? Contact – Vera McCray at veramccray06@yahoo.com

Jazz Showcase 2018 Ticket Order Form

orders can be turned in between Now and April 20th

Parents of Seniors, please order by April 2nd for priority seating in the front.

Please Note: Public sale of tickets will start April 3rd

Please return forms with payment in an envelope marked **JAZZ SHOWCASE TICKETS**. Orders should be returned to the **BLUE MAILBOX** or mailed to **LWE Music Department, Attn: Jazz Showcase Tickets, 201 Colorado Avenue, Frankfort, IL 60423**. Please make all checks payable to **LWE Music Boosters** and include **STUDENT ID ON MEMO LINE** or include your **IBA account number** below to use those funds. **PLEASE INDICATE YOUR STUDENT'S YEAR IN SCHOOL.**

Name: _____ Phone #1 _____

Phone #2: _____ E-Mail _____

Street Address: _____

City: _____ Zip _____

Please indicate the number of tickets and for which night: **Friday, May 4 # of Tix _____ @ \$22.00 = \$ _____**
(*or a table of 8 people for \$160.00)

Saturday, May 5 # of Tix _____ @ \$22.00 = \$ _____
(*or a table of 8 people for \$160.00)

IBA Account number (if applicable) _____ Total Payment Enclosed \$ _____

Student Performer Name(s): _____ Year: Sr Jr Soph Fr

Circle applicable groups. Student Performer is a member of: -Jazz Ensemble -Jazz Orchestra -Jazz Workshop -Jazz Combo1 -Jazz Combo 2
-Blue Revue -Blue Notes -True Blue

SEATING OPTION: If possible, we will seat you at the same table or near other families or friends if you indicate who you would like to sit with. _____

*SPECIAL NEEDS (wheelchair, food allergy, etc.) _____