

**War Memorial Center**  
750 North Lincoln Memorial Drive, Suite 315  
Milwaukee, WI 53202 (414) 273-5533

**July 3<sup>rd</sup>, 2018 Fireworks Tickets**  
**Purchase Form (Credit Card)**

See reverse side to purchase with Check/Cash

Bring completed form to purchase tickets in person at the office Monday – Friday, 9:00 a.m. – 4:30 p.m.

We impose a surcharge of 2.5% on credit card transactions which is not greater than our cost of acceptance.

**NO REFUNDS \* EVENT IS HELD RAIN OR SHINE**

**EVERYONE MUST HAVE A TICKET \* PARKING IS NOT INCLUDED**

How did you hear about our event? \_\_\_\_\_

Add your name to our mailing list for next year? \_\_\_ Yes \_\_\_ No

Name (PLEASE PRINT): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

*Seating requests are subject to War Memorial Center's discretion. Individual tickets must be purchased together to be seated together.*

\$ \_\_\_\_\_ for \_\_\_ table(s) of 8 @ \$369.50 per table (\$340.91 plus \$9.00 surcharge plus \$19.59 sales tax)

\$ \_\_\_\_\_ for \_\_\_ table(s) of 10 @ \$461.88 per table (\$426.14 plus \$11.25 surcharge plus \$24.49 sales tax)

\$ \_\_\_\_\_ for \_\_\_ individual tickets @ \$51.32 each (\$47.35 plus \$1.25 surcharge plus \$2.72 sales tax)  
(Maximum six (6) individual tickets may be purchased)

\$ \_\_\_\_\_ Administrative Fee \$20.53 per table or for individual tickets (\$18.94 plus \$0.50 surcharge plus \$1.09 sales tax)

*There is no fee when purchasing tickets at the office, Monday-Friday, 9:00 a.m. – 4:30 p.m.*

DONATE to the War Memorial Center – earned income covers just over half of the War Memorial's operating expenses making contributed income essential to our survival.

Please consider a tax-deductible contribution of \$10 to the War Memorial with your ticket purchase.

\$ \_\_\_\_\_ Optional Donation

\$ \_\_\_\_\_ **TOTAL AMOUNT DUE**

I authorize the War Memorial Center to charge my credit card \$ \_\_\_\_\_

VISA / MASTERCARD      Expiration Date: \_\_\_\_\_ / \_\_\_\_\_      Security Code: \_\_\_\_\_  
(circle one)

Credit card #     -     -     -

Signature of Cardholder: \_\_\_\_\_

**Note:** name and address listed above must be the name and billing address of credit card holder.

**FOR OFFICE USE:**

Ticket Numbers Issued: \_\_\_\_\_ – \_\_\_\_\_      CTN: \_\_\_\_\_

Staff: \_\_\_\_\_      Date: \_\_\_\_\_

**SPECIAL NOTES:** \_\_\_\_\_

**War Memorial Center**  
750 North Lincoln Memorial Drive, Suite 315  
Milwaukee, WI 53202 (414) 273-5533

**July 3<sup>rd</sup>, 2018 Fireworks Tickets**  
**Purchase Form (Cash/Check)**

See reverse side to purchase with Check/Cash

Bring completed form to purchase tickets in person at the office Monday – Friday, 9:00 a.m. – 4:30 p.m.

**NO REFUNDS \* EVENT IS HELD RAIN OR SHINE**

**EVERYONE MUST HAVE A TICKET \* PARKING IS NOT INCLUDED**

How did you hear about our event? \_\_\_\_\_

Add your name to our mailing list for next year? \_\_\_ Yes \_\_\_ No

Name (PLEASE PRINT): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

*Seating requests are subject to War Memorial Center's discretion. Individual tickets must be purchased together to be seated together.*

\$ \_\_\_\_\_ for \_\_\_ table(s) of 8 @ \$360.00 per table (\$340.91 plus \$19.09 sales tax)

\$ \_\_\_\_\_ for \_\_\_ table(s) of 10 @ \$450.00 per table (\$426.14 plus \$23.86 sales tax)

\$ \_\_\_\_\_ for \_\_\_ individual tickets @ \$50.00 each (\$47.35 plus \$2.65 sales tax)

(Maximum six (6) individual tickets may be purchased)

\$ \_\_\_\_\_ Administrative Fee \$20.00 per table or for individual tickets (\$18.94 plus \$1.06 sales tax)

***There is no fee when purchasing tickets at the office, Monday-Friday, 9:00 a.m. – 4:30 p.m.***

DONATE to the War Memorial Center – earned income covers just over half of the War Memorial's operating expenses making contributed income essential to our survival.

Please consider a tax-deductible contribution of \$10 to the War Memorial with your ticket purchase.

\$ \_\_\_\_\_ Optional Donation

\$ \_\_\_\_\_ **TOTAL AMOUNT DUE**

**FOR OFFICE USE:**

Ticket Numbers Issued: \_\_\_\_\_ – \_\_\_\_\_

CTN: \_\_\_\_\_

Staff: \_\_\_\_\_

Date: \_\_\_\_\_

**SPECIAL NOTES:** \_\_\_\_\_