



HAUNTINGS 2009 TOUR TICKETS ORDER FORM

Please mail or fax form with payment by **October 22nd** to:
The Loudoun Museum, 16 Loudoun St. SW, Leesburg, VA 20175
Phone: 703-777-7427 Fax: 703-777-8873

Tour Dates:

Friday, **October 23** Walking Tour _____ Advance Tickets* (\$15.00/\$13.00 members) \$ _____
 Saturday, **October 24** Walking Tour _____ Advance Tickets* (\$15.00/\$13.00 members) \$ _____

Total Sales \$ _____

***All tickets will be \$20.00 at the Door. Advance sale ends Thursday, 10/22.**

Walking Tour Time: Circle one

6:00	6:45	7:30	8:15	9:00	9:45
6:15	7:00	7:45	8:30	9:15	10:00pm, last tour
6:30	7:15	8:00	8:45	9:30	

PAYMENT INFORMATION for Advance Tickets:

Method (Circle): Cash Check Credit Card (MC, VISA, Discover) Check Number: _____

Credit Card Number: _____

3-4 digit security code _____ **Expiration Date:** _____

Name: _____

Mailing Address: _____

PHONE: _____ **E-mail:** _____

For Museum use only:

Date of Order: _____ **Salesperson Initials:** _____ **Date Entered into Database:** _____

Credit Card Processing Date: _____ **Approval Code:** _____

TICKETS MAILED ON _____ **OR PICKED UP ON:** _____

Walking Tour Ticket Numbers: From _____ **to** _____