

## Broadway In Chicago Gift Certificate Redemption Form

-Please fill out fields below

-In order to process your Gift Certificate, all requests must be received with all the information below completed.

-Please attach clearly visible scan or photo of your Gift Certificate(s) with this email.

\*\*Please note that your redemption request does not qualify as a purchase until confirmation is received

Number of Gift Certificate(s) Attached: \_\_\_\_\_

Ticket Delivery Method:

Mail

Box Office Will Call

### Recipient Information

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

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

City / State / Zip: \_\_\_\_\_

Email: \_\_\_\_\_

### Performance Request Information

Show Name: \_\_\_\_\_

**\*\*Select up to three Desired Day/Dates/Times\*\***

Performance Day: \_\_\_\_\_

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

Time: \_\_\_\_\_

Performance Day: \_\_\_\_\_

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

Time: \_\_\_\_\_

Performance Day: \_\_\_\_\_

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

Time: \_\_\_\_\_

**\*\*Fill in one or more of the desired seating locations preferred\*\***

ORCHESTRA

DRESS  
CIRCLE

LOGE

MEZZANINE

BALCONY

CENTER

RIGHT/LEFT

Desired Seat Location(s): \_\_\_\_\_

Number of Tickets: \_\_\_\_\_

Maximum Price Per Ticket

\$ \_\_\_\_\_

Please detail any comments or special requests with this inquiry:

---