



# THE 4th Chicago Cabaret Convention

## 2017 TICKET ORDER FORM

### payment information (please print)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (day) \_\_\_\_\_ (eve) \_\_\_\_\_ e-mail \_\_\_\_\_

Keep me updated on the Mabel Mercer Foundation's activities via email.

◇ Please accept my check made payable to: *The Mabel Mercer Foundation*

◇ Please charge my AmEx, Mastercard, Visa or Discover: \_\_\_\_\_ exp. \_\_\_\_\_

### select your performances

DATE & TIME	DATE	TIME	# OF TICKETS			TOTAL
<i>A Swell Party</i> Cocktails & Cabaret Gala Opening Palmer House Hilton Empire Room	Wed, April 19	7-9 pm	# _____ x \$150			\$
<i>Cabaret Convention</i> Park West — Night 2	Thur, April 20	8 pm	RESERVED SEATING VIP # _____ x \$100	GENERAL ADMISSION (PRIME) # _____ x \$50	GENERAL ADMISSION (BALCONY/REAR) # _____ x \$25	\$
<i>Cabaret Convention</i> Park West — Night 3	Fri, April 21	8 pm	# _____ x \$100	# _____ x \$50	# _____ x \$25	\$

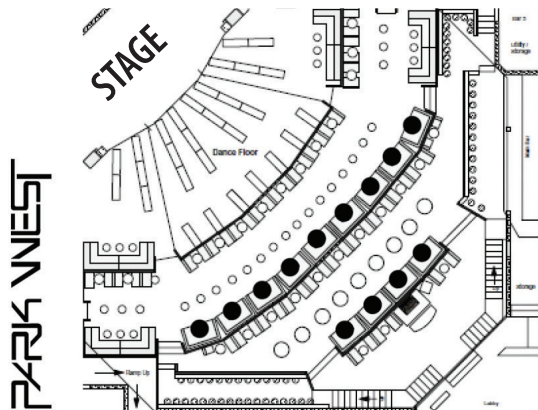
### total number of tickets

I will accept lower priced seats if others are sold out: YES NO

In addition, I am happy to include a contribution to the Mabel Mercer Foundation in the amount of: \$

I am unable to attend, but I include a contribution to the Mabel Mercer Foundation in the amount of: \$

**total enclosed** \$



● = VIP RESERVED SEATING

PLEASE RETURN THIS ORDER FORM TO:

**Mabel Mercer Foundation**  
160 East 48th Street #1P • New York, NY 10017  
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info@mabelmercer.org  
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