



# SCHOOLHOUSE ROCK TOO TICKET FORM

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

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

City: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

e-mail: \_\_\_\_\_

**Performance (FIRST CHOICE) PLEASE CHECK OUR WEBSITE FOR SOLD OUT DATES.  
[www.playsinthepark.com](http://www.playsinthepark.com)**

SUNDAY, October 8 at 12:00 p.m. \_\_\_\_\_ 3 p.m. \_\_\_\_\_

SATURDAY, October 14 at 12:00 p.m. \_\_\_\_\_ 3 p.m. \_\_\_\_\_

SUNDAY, October 15 at 12:00 p.m. \_\_\_\_\_ 3 p.m. \_\_\_\_\_

SATURDAY, October 21 at 12:00 p.m. \_\_\_\_\_ 3 p.m. \_\_\_\_\_

SUNDAY, October 22 at 12:00 p.m. \_\_\_\_\_ 3 p.m. \_\_\_\_\_

**Performance (SECOND CHOICE)**

Show: \_\_\_\_\_ at \_\_\_\_\_ p.m.

**Performance (THIRD CHOICE)**

Show: \_\_\_\_\_ at \_\_\_\_\_ p.m.

Number of adult tickets at \$3.00 each: \_\_\_\_\_ x \$3.00 = \$ \_\_\_\_\_

Number of children's tickets at \$2.00 each: \_\_\_\_\_ x \$2.00 = \$ \_\_\_\_\_

I have enclosed a check made out to the TREASURER, MIDDLESEX COUNTY in the amount of:

\$ \_\_\_\_\_ Check Number \_\_\_\_\_

And have enclosed a self-addressed stamped envelope for the return of the tickets.  
I understand there are no exchanges or cancellations.

**Mail to:** SCHOOLHOUSE ROCK TOO TICKETS  
c/o PLAYS-IN-THE-PARK  
PO BOX 661  
NEW BRUNSWICK, NJ 08903