# Complimentary Ticket Request Form

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<table>
<thead>
<tr>
<th>Title of Event</th>
<th>Date of Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Requester</td>
<td>Today’s Date</td>
</tr>
<tr>
<td>Phone Number</td>
<td>Name to Hold Under</td>
</tr>
<tr>
<td>Accessibility Concerns?</td>
<td>Do not write name if you’re taking the tickets with you</td>
</tr>
<tr>
<td># of Tickets Requested</td>
<td>(Must not exceed amount allowed by department for any given event. Additional tickets must be purchased)</td>
</tr>
</tbody>
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### Your Department (circle one)
- Music
- Theater
- Dance
- Visual Arts
- Dean’s Office

### You Are (circle one)
- Alumni(A)
- Faculty(E)
- Staff(E)
- Senior(O)
- Public(P)
- Student(S)

### Purpose (circle, if applicable)
- Retiree
- Recruitment
- TA
- Soloist
- Performer
- Director
- Designer
- Donor/VIP

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**Please note:** *No one under the age of 5, including babes-in-arms, is permitted at any Mason Gross Performing Arts Center performance.* Any children coming to a live event must have a ticket and be able to quietly sit and focus on the event so as not to disrupt the performers or audience.

Submit this completed and signed Complimentary Ticket Request Form directly to the Main Ticket Office via mail or in person at any time during daytime business hours of Monday-Friday 10am–5:30pm and Saturday noon–5:30pm. The Ticket Office will not process complimentary tickets at any other time. Allow 1 business day for processing. Confirmation of processing is solely with the requestor. Complimentary tickets are not guaranteed, are distributed on an as available basis, are not transferable and not combinable.

I understand that by signing this form and accepting the tickets, I have accepted full responsibility for the usage of the tickets. The Mason Gross Performing Arts Center Ticket Office releases all rights and responsibilities to the tickets to the undersigned.

I have read and understood the above policy: ________________________________

(Signature of requester)

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### INTERNAL USE ONLY: OPERATOR _____________________  PROCESS DATE: _____________________

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