

## ORDER FORM

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

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### PLEASE INDICATE YOUR TICKET PREFERENCES:

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Name of Event You Wish to Attend: \_\_\_\_\_ Date of Event: \_\_\_\_\_  
*(Please refer to website ticketing page for this information)*

Number of Tickets to Event: \_\_\_\_\_ @ \$ \_\_\_\_\_ each

Total for my order: \$ \_\_\_\_\_

How did you hear about this event? \_\_\_\_\_

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### PAYMENT INFORMATION:

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Method of Payment\*:

\_\_\_\_\_ Check made payable to Professional Flair, Inc.

\_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ American Express

Credit Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ Security Code (on back of card: 3 digits for Visa/MC; 4 digits for AmEx) \_\_\_\_\_

If Different From Above Contact Information:

Billing Address \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

*\*Please note that a service fee is applicable to credit card transactions. MasterCard: 4.32%, Visa: 4.325%, AmEx: 2.85%.*

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Please fax completed order form to 216.432.0308 or mail (with payment) directly to:  
The Dancing Wheels Company & School, 3615 Euclid Avenue, 3rd Floor, Cleveland, Ohio 44115

**Upon receipt of this form, you will be contacted to confirm your order.**

