



Discount Ticket Order Form

Company Name _____

VIP TICKETS: \$6.00/Adult

10 20 40 60 80 Other _____

Please provide payment information.

I prefer to pay for the additional admission passes by:

Check for \$_____ Enclosed (_____ admission passes @ \$6.00 each)

(Make checks payable to "Marketplace Events")

Credit Card: ___ VISA ___ MASTERCARD ___ AMEX (_____ admission passes @ \$6.00 each)

Credit Card Account Number: _____
(please print clearly)

Exp. Date: _____ Amount: \$ _____

Card Holder's Name (please print clearly): _____

Signature: _____ Date: _____

Email Address: _____

PLEASE SEND MY VIP TICKETS TO:

Company _____

Contact _____

Address _____

City _____ State _____ Zip _____ Email _____

Phone _____ Fax _____

Mail Form To:

Minneapolis Home + Garden Show

Attn: Erika Knuth

7550 France Ave S. Suite 260

Edina, MN 55435

Or Fax To:

952-933-7548