

SEASON TICKET SETS ORDER FORM:

(Season tickets are non-refundable and non-exchangeable)

Name: _____

Street Address: _____

City: _____

State/Zip: _____

Telephone: (____) _____

Email: _____

(Each set includes 1 ticket for each of the 6 individual nightly performances in the Playhouse. Email addresses will not be shared.)

# OF SETS	TOTAL \$ AMOUNT
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Number of season ticket sets @ \$120: _____



DONATION \$ _____

Total \$ _____

— Check ONLY, enclosed payable to:

OMGCMF Inc.

Mail order form with SELF-ADDRESSED, STAMPED ENVELOPE to:

The Original Mt. Gretna Cicada Music Festival Inc.
P.O. Box 21 • Mt. Gretna, PA 17064

www.originalcicadamusicfestival.com/

Support The Original Mt. Gretna Cicada Music Festival Inc.

I wish to show my support by giving an individual gift of:

Benefactor \$1000+ _____ Platinum \$500+ _____

Gold \$101+ _____ Silver \$51 - \$100 _____

Bronze \$26 - \$50 _____ Friends \$1 - \$25 _____

In recognition of this support, I do _____ do not _____
wish my name to be listed in the program as:

(please print name clearly)

INDIVIDUAL TICKETS ORDER FORM:

(tickets are non-refundable and non-exchangeable)

Name: _____

Address: _____

City: _____

State/Zip: _____

Telephone: (____) _____

Email: _____

(Email addresses will not be shared.)

PRICE	# OF TICKETS	TOTAL \$ AMOUNT
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NJ BEACH BOYS \$20 _____ \$ _____

J. T. EXPRESS \$20 _____ \$ _____

FRONTIERS \$20 _____ \$ _____

JOHN WITH GEORGE IN CONCERT \$20 _____ \$ _____

BOBBY 'BROOKS' WILSON & THE CHICLETTES \$20 _____ \$ _____

THE EVERLY BROTHERS EXPERIENCE FEATURING THE ZMED BROTHERS \$20 _____ \$ _____



DONATION \$ _____

Total \$ _____

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