

2013 Senior Adult Group Order Form (Group Members must be ages 55+)

Group Name:	::			_Date of Visit:				
Contact Name:	Phone:		Email:					
Mailing Address:	City:			State:	Zip Code:			
Mrs. Claus' Family Feast & Admission Package								
• Christmas Town Admission • 3 PM Early Access to Busch Gardens •								
All-You-Care-To-Eat Dinner Buffet •								
• Minimum Purchase of 15 tickets per night required • Tickets	are valid for on	e event night	only • Space is lir	nited & subject to	availablity •			
Please Select Date of Visit			Price w/o Tax	Price w/ Tax	QTY	TOTAL		
6:00 PM Dinner								
Sun. Dec 1 Fri. Dec 6 Sun. Dec 8 Thur.		Senior	\$38.00	\$40.66		\$		
Fri. Dec 13 Sun. Dec 15 Mon. Dec 16 Tue. [Dec 17	Adult						
☐ Wed. Dec 18 ☐ Thur. Dec 19								
Select Dinner Seating: G:00 PM 7:30 PM								
☐ Fri. Nov 29 ☐ Sat. Nov 30 ☐ Sat. Dec 7 ☐ Sat. D	ec 14	Senior	\$48.00	\$51.36		\$		
		Adult						
GROUPS	_							
Minimum Purchase of 15 tickets per nig	ht required • Ti			-	071/			
Please Mark Date of Visit			Price w/o lax	Price w/ Tax	QTY	<u>TOTAL</u>		
- San Bee o	. Dec 12							
Jan. Bee 13 Willing Bee 10 Tue.	Dec 17	Senior	\$20.00	\$21.40		\$		
☐ Wed. Dec 18 ☐ Thur. Dec 19		Adult		•				
☐ Fri. Nov 29 ☐ Sat. Nov 30 ☐ Sat. Dec 7 ☐ Sat. □	Dec 14							
☐ Fri. Dec 20 ☐ Sat. Dec 21 ☐ Sun. Dec 22 ☐ Mon.		Senior	\$30.00	\$32.10		\$		
	. DCC 25	Adult	•					
Christmas Town Parking			\$14.02	\$15.00		<u>Ş</u>		
Shipping and Handling for Ticket Delivery (Advance Mail Out Op	otion Only)			\$10.00		\$		
				d Total	\$			
Choose Your Ticket Distribution:			Choose Y	our Paymen	t Option:			
☐ Advance Pick-up at following locations:			☐ Organizational Check*					
Please Indicate pick-up date: (Payment due at time of pick-up.)		☐ Organizational Credit Card**						
Order form must be received at least 7 business days prior to requested pick-up date		Cashier Check						
Busch Gardens Marketing in Tampa		Cash, money orders, or starter checks are not accepted						
3605 E. Bougainvillea Ave., Tampa, FL 33612		* An organizational check or organizational credit card must have organization's name printed on it, and must be used for payment if the group is using a Florida Tax Exempt Certificate. If picking up tickets you must present a copy of the tax-exempt form with an organizational check at the Group Sales Window. If sending in payment for tickets to be mailed out, please include a copy of the tax-exempt certificate with an organizational						
(Monday-Friday, 8:30 am- 12:00pm, 1:00 pm-4:00 pm)								
SeaWorld Advance Sales in Orlando								
6817 Westwood Blvd., Orlando, FL 32821		check.						
(Monday-Friday, 8:30 am- 4:00 pm)		**Credit Card Authorization form required for advance mail out only. Please complete attached Credit Card Authorization Form.						
Advance Mail Out, send payment to:		Event Disclaimers:						
SeaWorld Parks & Entertainment, Inc.		Minimum purchase of 15 tickets per night required. Group members must be ages 55+. Tickets are valid for one event night only. Christmas Town tickets are subject to availability and are not valid for general daily admission. Not valid with any other discounts or offers						
ATTN: Group Sales Christmas Town								
6817 Westwood Blvd., Orlando, FL 32821			unless otherwise specified. Operating hours are subject to change without notice. No rain checks, readmits, or refunds. Pricing subject to change without notice.					
Email: swobgtgroupsales@seaworld.com	Lilecks, readmits	, or retunds. Pricing	subject to change w	ntnout notice.				
Phone: (866) 781-1333 Fax Payment to: (407) 370-1759								

Busch Gardens. CHRISTMAS TOWN...

2013 Group Sales Credit Card Authorization Form

Company/Organization	n Name						
		()					
Contact Name		Contact's Phone #					
I,card in	the amount of \$						
Credit Card #			CID #:	EXP:			
-							
Print Name:							
Billing Address:							
<u>.</u>							
-							
City		Stat	e	Zip			
Phone:							
i none.							
T'							
Ticket Quantity:							
Confirmation:							
Group Name:							
	** Please provide	a copy of the front and ba	ack of your credit ca	ard **			
	Fax completed form to (407) 370-1759						
_							
Date:							