

# LAGAN VALLEY ISLAND BOX OFFICE SERVICE

**Please take the time to complete all areas of this form in order that we can pass on the correct details regarding your event to all our customers.**

**CLIENT'S DETAILS:**

Company Name:			
Address:		Postcode:	
Telephone Number:		Fax Number:	
Email Address:		Web Site:	
Contact Name:			

**TICKET ENTRY:**

Title of Event (max of 30 characters):	
Promoter (max of 30 characters):	
Date(s):	
Performance starts at:	
Ticket price:	
Concessions (please tick if applicable):	<input type="checkbox"/> OAPs £____ <input type="checkbox"/> Under 16s £____ <input type="checkbox"/> Disabled £____

**ADDITIONAL INFORMATION:**

Performance times are:	Start:		Interval:		Finish:	
Is your event being promoted under any other name other than that printed on the ticket?						
Please list the performers that will be taking part in your event.						
Additional information:						

**COMPLETED FORM MUST BE RETURNED TO:  
Centre Management, Lagan Valley Island, Lisburn, BT27 4RL  
Fax No. (028) 9250 9291**