

# Village Players Gift Certificate Form

My Name \_\_\_\_\_

My Address \_\_\_\_\_

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

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

\_\_\_\_\_ Number of Season Tickets at \$39 each

TO: Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_ Amt. for this Cert. \_\_\_\_\_

\_\_\_\_\_ Number of Season Tickets at \$39 each

TO: Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_ Amt. for this Cert. \_\_\_\_\_

\_\_\_\_\_ Number of Season Tickets at \$39 each

TO: Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_ Amt. for this Cert. \_\_\_\_\_

TOTAL AMOUNT ENCLOSED \_\_\_\_\_

PLEASE MAKE CHECKS OUT TO THE VILLAGE PLAYERS AND MAIL THIS FORM WITH YOUR CHECK TO:

Carol Bense, 67 Tuftonboro Neck Rd., Mirror lake, NH 03853

The gift certificate/s will be sent to you for presentation to your recipients.

**To receive the certificates in time for Christmas, we must receive your order by December 16, 2009.**