

Date \_\_\_\_\_

Processor \_\_\_\_\_

*Buffalo Philharmonic Orchestra*  
*Opening Night Gala & Concert with Anne-Sophie Mutter*

Saturday, September 16, 2017

Cocktails 5:30 pm | Dinner 6:00 pm | Concert 8:00 pm | Dessert reception to follow

**Ticket Order Form**

**CONTACT INFORMATION:**

Name \_\_\_\_\_

Guest name(s) \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

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**TICKETING OPTIONS:**

**Dinner only (\$275 ea.)** (tax-deduction TBD) Qty \_\_\_\_\_ Amount \$ \_\_\_\_\_

**Dinner & Concert (\$375 ea.)** (tax-deduction TBD) Qty \_\_\_\_\_ Amount \$ \_\_\_\_\_

**Table Sponsorship (\$7,500)** (tax-deduction TBD) Qty \_\_\_\_\_ Amount \$ \_\_\_\_\_

(Write guest names on back)

**Contribution** Amount \$ \_\_\_\_\_

**TOTAL AMOUNT \$** \_\_\_\_\_

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**PAYMENT:**

Method of Payment:  **Check\*** or  **Credit card**

\*Send/make payable to: Buffalo Philharmonic Orchestra, 499 Franklin Street, Buffalo, NY 14202

Credit Card type:  VISA  Master Card  AmEx  Discover

Card no. \_\_\_\_\_ Exp. \_\_\_\_ / \_\_\_\_

Name on card \_\_\_\_\_ CVV \_\_\_\_\_

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**NOTES:**

Special needs for concert \_\_\_\_\_

Food allergies \_\_\_\_\_

Dinner and concert seating preferences \_\_\_\_\_

*Please return to Megan Smith in Development*

Date \_\_\_\_\_

Processor \_\_\_\_\_

**Sponsorship table guest names:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_