

# TICKET ORDER FORM



## Return This Order Form:

**Mail:**  
Six Flags Great America  
542 North Route 21  
Gurnee, IL 60031  
Attn: Sales Department

**Fax:**  
(847) 625-4814

## TICKETS

**Great Savings! Reduced Group Prices in 2019. Save time and money, buy online at sixflags.com.**

Ticket Type	Discount Price	How Many	Total
Dancer Tickets	\$37.25		\$
Dancer with Season Pass	\$20.00		\$
Spectator Tickets	\$37.25		\$

Additional Items	Discount Price	How Many	Total
Meal Vouchers	\$15.00		\$
Prepaid Parking	\$26.00		\$
Complimentary 1 per 20 tickets purchased* (Applies to Admission Ticket Only)	FREE		\$
Processing Fee <small>Orders must be received 10 business days in advance. Tickets will be shipped via USPS.</small>	\$10.00	1	\$10.00
<b>Grand Total</b>			<b>\$</b>

## PAYMENT METHOD

My payment is enclosed. (Multiple checks will not be accepted.) Please make check payable to Six Flags Great America.

Check #: \_\_\_\_\_ Amount \$: \_\_\_\_\_

### Procedure for credit card payments:

Once the order form is received (by mail or fax) the card holder will be contacted for credit card payment information.

### Financial Contact

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

Phone: \_\_\_\_\_



\*Applies to admission ticket only. †Address for ticket delivery. NOTE: Maximum of 15 minutes for the entire performance. Tickets are non-refundable. Due to maintenance and other circumstances, certain rides, shows and attractions (including new rides) may not be open to the public.

**Entry Information:**  Sunday, May 5  Sunday, May 19  Sunday, June 2  Sunday, June 9

Please type or print clearly. Please provide street address as we cannot ship to a P.O. box.

Organization: \_\_\_\_\_

Instructor: \_\_\_\_\_

Address\*: \_\_\_\_\_ Apt #: \_\_\_\_\_  
(NO P.O. BOXES PLEASE)

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

Phone (daytime): \_\_\_\_\_

Phone (evening): \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Group Leader: \_\_\_\_\_

Name of Routine: \_\_\_\_\_ Time of Routine: \_\_\_\_\_

Name of Routine: \_\_\_\_\_ Time of Routine: \_\_\_\_\_

Name of Routine: \_\_\_\_\_ Time of Routine: \_\_\_\_\_

Name of Routine: \_\_\_\_\_ Time of Routine: \_\_\_\_\_

Name of Routine: \_\_\_\_\_ Time of Routine: \_\_\_\_\_

RESERVE BUSES FOR YOUR GROUP  
**866-770-6702**  
METROPOLITAN SHUTTLE®  
OFFICIAL PARTNER OF SIX FLAGS®

