Project Arts Centre Complimentary Ticket Request Form

NB: Please return this form before 6pm (or in the case of early/lunchtime shows a minimum of 3 hours prior to the start of the performance)

Email to both:
box-office@projectartscentre.ie
AND
melanie@projectartscentre.ie

COMPANY DETAILS

Company Name:	
Form Completed by:	Phone No. for today:

PERFORMANCE DETAILS

Name of Performance:	
Performance Date:	Performance Time:

TICKET LIST (Please use full names)

	FULL NAME
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TOTAL NO OF COMPS:	

For Project Arts Centre Use Only:
Ticket Requested Completed on / / @ . PM by