

TICKET RESERVATION

[SEND FAX TO +81 (3) 5355-1276]

YOUR NAME (in block letters):

Family Name

First Name

THE PERFORMANCE TITLE

DATE & TIME OF THE PERFORMANCE (day/month/time)

____ / ____ / ____ :

TICKETS YOU WOULD LIKE TO PURCHASE & NUMBER of TICKETS

(CLASS-1ST, 2ND or TYPES-ADULTS, STUDENTS)

CLASS _____ TYPE _____ NUMBER OF TICKETS _____

YOUR ADDRESS IN JAPAN (or EXACT HOTEL NAME)

YOUR FAX NUMBER (A Confirmation Sheet will be sent)

YOUR E-MAIL ADDRESS (OPTIONAL)
