

ROBERT BURNS SUPPER

Ticket Order Form

Please print this page, complete the form below and return, with payment, to:

**Amherst Museum Burns Supper
3755 Tonawanda Creek Road
Amherst, NY 14228**

Name: _____

Address: _____

City/State: _____

Zip: _____

Phone: _____

Email: _____

Number of tickets: _____ at \$37 each

TOTAL AMOUNT ENCLOSED \$ _____

_____ Enclosed is my check payable to: Amherst Museum

_____ Please charge my: Visa – MasterCard – Discover (please circle one)

Cardholder's name: _____

Credit card #: _____

Expiration date: _____

Signature: _____