



NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

DAYTIME PHONE/CELL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**GENERAL ADMISSION:**

<u>TYPE</u>	<u>AGES</u>	<u>QTY.</u>	<u>PRICE</u>	<u>COST</u>
Adult	12 and older.	_____	@ \$19 each =	\$ _____
Youth	6 – 11 (5 & under FREE)	_____	@ \$12 each =	\$ _____

**RESERVED BOX SEAT (All Ages Require a Box Seat Ticket):**

SATURDAY	All Ages	_____	@ \$25 each =	\$ _____
SUNDAY	All Ages	_____	@ \$25 each =	\$ _____
MONDAY	All Ages	_____	@ \$25 each =	\$ _____

Service Charge: \$ \_\_\_\_\_ 2.00

**TOTAL:** \$ \_\_\_\_\_

**METHOD OF PAYMENT:** Check \_\_\_\_\_ Visa \_\_\_\_\_ M/C \_\_\_\_\_

**Credit Card #** \_\_\_\_\_ **Expiration:** \_\_\_\_\_  
(month – year)

**Signature:** \_\_\_\_\_

**MAIL Order Form to:** Cleveland National Air Show  
 1501 N. Marginal Rd., Suite 166  
 Cleveland, OH 44114

**FAX to:** 216-781-7810

**BOX OFFICE DEADLINE:** Friday, August 27th is the LAST DAY for PHONE, FAX, INTERNET AND MAIL ORDER SALES.

**Box Office walk-In sales will continue through Friday, September 3rd at 6:00 p.m.**

Gates open at 9:00 a.m. No entry/re-entry after 3:30 p.m.

**NO RV's** allowed in Air Show Parking lots.  
**No Coolers. Carry-in items will be restricted.**

**Thank you for your patronage of the Cleveland National Air Show.**

**WE LOOK FORWARD TO SEEING YOU!**