

SAINT SOPHIA GREEK ORTHODOX CATHEDRAL

Reverend Dr. Steven P. Zorzos, Presiding Priest l Reverend Dimitrios J. Lee, Assistant Priest Reverend Dr. John T. Tavlarides, Presiding Priest Emeritus



Tickets will be sold in the Church Auditorium beginning Sunday, February 22, 2015 from 11:30am until 1:00pm.

Tables will be assigned on a first come-first serve basis. Individuals who wish to sit with their friends need to purchase all of their tickets at the same time. The Ticket Order Form should be filled out to include the names of all the individuals who will be sitting at that table as well as appropriate form of payment for the entire table.

Tickets cannot be exchanged for another table. You will not be able to add additional people to your group after you have obtained your tickets. Tables seat ten (10) people. If you have more than 10 in your group please decide how you will split the group. We will attempt to seat you at adjoining tables if seats are available. Again these tables will be sold and closed on a rolling basis.

TICKETS PURCHASED VIA THE WEBSITE

Tickets will also be sold on the Saint Sophia Website. Please follow the same procedures below if you wish to purchase tickets for your group. We accept Checks, VISA, MasterCard, American Express and Discover.

REMINDERS TO NOTE AND REMEMBER

- If you wish to sit with friends appoint one individual to be in charge of purchasing your tickets. This will guarantee that you will all have the same table and there will be no confusion the evening of the event.
- Remember ... names of everyone in your group for whom you are buying tickets must be listed on the Ticket Order Form.
- We cannot consolidate tables or groups once the tickets are purchased.
- Our most valuable record in case there is a question is the list you supplied to us on the Ticket Order Form.
- Tickets are limited. Please make every attempt to purchase them earlier rather than later. If you have a group "earlier" is certainly better.



SAINT SOPHIA CATHEDRAL – CONSECRATION BANQUET TICKET ORDER FORM

Name					
Address:					
CITY:	STATE:			ZIP:	
Номе Рнопе:	Office:		Mobile:		
EMAIL:					
TICKET PRICE:	\$175 PER	PERSON _		\$1,750 TA	BLE OF 10
	TO	TAL ENCL	OSED		
Names of Individ	UALS TO BE SI	EATED AT T	ABLE: (PLEA	SE PRINT CL	EARLY)
1					
2					
9 10					
10					
CASH	CHECK	VISA	MC	AMEX	DISCOVER
CREDIT CARD NUMBER	R		OR	EXP. DATE	CID#
(VISIT (OUR WEBSITE AT TO I		011		SECRATION/
(PLEASE MAKE CH	IECKS PAYABL	E TO SAINT S	SOPHIA CATHEI	ORAL)
SIGNATURE:	DATE:				