## **SCHOOL GROUP TICKET RESERVATION-2024**

(Payment upon arrival)



Please complete the following: (In	ncomplete reservations will not l	be accepted)			
Name of School					
		1	,		
		(	)		
Contact Name		Cont	act Telephor	16	
Address					
City	State		ZIP		
Email Address (All confirmations & infor	mation will be via email)				
Day/Date of visit (CIRCLE ONE):	Mon. 2/12 Tues. 2/13	Wed. 2/14	Thurs. 2/15	Fri. 2/16	Mon.2/19
(20 ticket minimum to ohta	in group rates, \$13.44 each incl	udina City of Chic	rago & Cook Cour	ntv Amusemen	t Tax)
Estimated number of student tick	rets needed:	_			
Ticket Cost + Credit Card Fee (if a	pplicable) = Total Due _				
Number of complimentary chape	rone tickets (1:10 ratio	):			
Payment type (Circle one)	Organization's Check	Crei	dit Card		

Reserved tickets purchased on the day you attend are only good for that day and are not refundable!!!

Send/make check payable to:

## **Chicago Automobile Trade Association**

18W200 Butterfield Rd. - Oakbrook Terrace, IL 60181-4810 P - 630-495-2282 | F - 630-495-2260 | E - rsammarco@drivechicago.com