



# Order Form

September 15-16, 2018

Date: \_\_\_\_\_

Name: \_\_\_\_\_

**Mail Tickets**  
Date Mailed \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Hold Tickets at Will Call**

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Purchase Online Tickets:**  
[www.airsho.org](http://www.airsho.org)

*Mail Form: High Sky Wing P.O. Box 61064 Midland TX 79711*  
*Fax Form: 432-685-1277 Office: 432-703-3142*

<u>Tickets</u>	<u>Price</u>	<u>Quantity</u>	<u>Total</u>
<b>General Admission</b> Saturday or Sunday Adult (ages 13 & up)	\$20		\$
General Admission Saturday or Sunday Kids (ages 6-12)	\$5		\$
Child (ages 5 & under)	Free		\$ Free
<b>Flight Line Chalet</b> Saturday Adult (ages 13 & up)	\$50		\$
Flight Line Chalet Saturday Kids (ages 6-12)	\$30		\$
Flight Line Chalet Saturday Child (ages 5 & under)	\$15		\$
Flight Line Chalet Sunday Adult (ages 13 & up)	\$50		\$
Flight Line Chalet Sunday Kids (ages 6-12)	\$30		\$
Flight Line Chalet Sunday Child (ages 5 & under)	\$15		\$
<b>Fighter Squadron Chalet</b> Saturday Adult (ages 13 & up)	\$125		\$
Fighter Squadron Chalet Saturday Kids (ages 6-12)	\$75		\$
Fighter Squadron Chalet Saturday Child (ages 5 & under)	\$25		\$
Fighter Squadron Chalet Saturday Table for 8 Guests	\$880		\$
Fighter Squadron Chalet Sunday Adult (ages 13 & up)	\$125		\$
Fighter Squadron Chalet Sunday Kids (ages 6-12)	\$75		\$
Fighter Squadron Chalet Sunday Child (ages 5 & under)	\$25		\$
Fighter Squadron Chalet Sunday Table for 7 Guests	\$880		\$
Fighter Squadron Chalet 2-Day Adult (ages 13 & up)	\$200		\$
Fighter Squadron Chalet 2-Day Kids (ages 6-12)	\$125		\$
Fighter Squadron Chalet 2-Day Child (ages 5 & under)	\$50		\$
<b>Private Chalet</b> 1-day (25 tickets) Saturday	\$3,500		\$
Private Chalet 1-day (25 tickets) Sunday	\$3,500		\$
Private Chalet 2-day Sat/Sun (25 tickets each day)	\$4,600		\$
<b>Grand Total</b>			\$

**Method of Payment:**  Check # \_\_\_\_\_  Visa  Mastercard  Amex  Discover

Cardholders Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_ CVV: \_\_\_\_\_ Amount: \$ \_\_\_\_\_