



**madison
children's**
m u s e u m

25th  American Girl® Benefit Sale
for Madison Children's Museum
and American Girl's Fund for Children

Member Ticket Order Form

Please complete all information and print clearly. This form is for MCM member use only.

Member Last Name: _____

Member First Name: _____

Address: _____

City, State, ZIP: _____

Email: _____ Phone Number: _____

MCM Membership Number: _____ Expiration Date: _____

Number of tickets, including one free ticket per membership (limit 4 tickets total): _____

Amount enclosed (\$5 each): _____

Don't forget these important steps for your ticket order:

NO ORDERS WILL BE ACCEPTED WITH A POSTMARK DATE PRIOR TO JUNE 12, 2012

- A stamped, self-addressed, letter-sized return envelope must be included
- Make check or money order payable to MCM Foundation, Inc.
- Mail your order form to:

**American Girl Benefit Sale Tickets
Madison Children's Museum
P.O. Box 620185
Middleton, WI 53562-0185**



For Staff Use Only

Postmark Date: _____

Entry Time: _____

Ticket #: _____

Free Ticket

Date Mailed: _____

Returned Check

Check #: _____

Deposit Date: _____

Initials: _____

Please do not mail ticket order form after July 7.