



Get On. Find Out.

Group Ticket Order Form

To place an order, email or fax this form to: groupsales@experientheride.com Fax 212-247-7145. Or call 212-244-2551 x 155 Minimum group order is 10.

Acceptable forms of payment: Organization, company or school checks, Bank checks, money orders or certified personal checks, MC, Visa, American Express

Group Name: _____

Today's Date: _____

Contact Person: _____

FIRST

LAST

Address: _____

STREET ADDRESS

CITY

STATE

ZIP

COUNTRY

Contact Phone Number: _____

Contact Email: _____

Date of Performance: _____

Time of Performance: _____

Alternate Date of Performance: _____

Alternate Time of Performance: _____

Number of Tickets: _____ Price Per Ticket: _____ Total: _____

Credit Card Information

Type of Credit Card: (check one) MasterCard Visa American Express

Name on the Credit Card: _____

Company (if any) on the Credit Card: _____

Credit Card Number: _____ Credit Card Expiration Date: _____ Credit Card Security (CID) Code: _____

Billing Address of card holder: _____

STREET ADDRESS

CITY

STATE

ZIP

COUNTRY

Name that should appear on the tickets (max of 25 characters): _____

Person(s) Authorized to pick up tickets: _____

Checks may also be mailed in the total amount to: THE RIDE NY, 311 West 43rd Street, Suite 206, New York, NY 10036