

# Martinis & IMAX® GROUP ORDER FORM

Please review all policies regarding Martinis & IMAX® Group Tickets before completing this form.  
Form must be received at least one week prior to event date.

Contact Name/Group Leader: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_  Yes, please add me to your e-mail list.

Visit Date: \_\_\_\_\_ Preferred IMAX® Show Time: \_\_\_\_\_

Type of Group:

Corporate    Social    Young Professional    Alumni    Other Organization: \_\_\_\_\_

Item	Quantity	Amount
IMAX® Tickets*		
Adult IMAX® tickets at \$10 each	_____ x \$10.70=	_____
Student/Senior (62+) IMAX® tickets at \$9 each	_____ x \$9.63=	_____
Buffet Line Tickets** ††		
Appetizer Tickets at \$9 each	_____ x \$9=	_____
Entrée Tickets at \$20 each	_____ x \$20=	_____
Dessert Tickets at \$6 each	_____ x \$6=	_____
Drink Tickets† ††		
Drink Tickets at \$8 each	_____ x \$8=	_____
<b>TOTAL:</b>		_____

\* Price applies to groups of 10 or more only. IMAX® tickets are non-refundable.  
Rain checks can be purchased the event night prior to movie for \$2.00 per ticket.  
\*\* Available to groups of 10 or more only. Buffet tickets are exclusively for your event date and are not redeemable for any other night. Additional buffet tickets may be available event night at the ticketing counter (while supplies last). Buffet tickets are non-refundable.  
† Available to groups of 10 or more only. Drink tickets are exclusively for your event date and are not redeemable for any other night. Additional drink tickets are available event night at the ticketing counter. Drink tickets are non-refundable.  
†† Food tickets and drink tickets include gratuity.

**TICKET DISTRIBUTION** (Client is responsible for staffing their registration table and for ticket distribution. Registration tables are only available to groups who purchase drink tickets or buffet tickets.)

- I would like a registration table to hand out tickets on my event night.
- I would like to pick up tickets to distribute prior to my event night.  
(Tickets must be presented for entrance into Martinis & IMAX®.)

**PAYMENT INFORMATION**

Charge to:  VISA    MC    AMEX    DISCOVER

Account #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Please fax completed form to 404.929.6405. A fax with your confirmation number will be sent to you within 48 hours of receipt of fax request to confirm your order. Your credit card will be charged upon confirmation of this order. You will be contacted if we are unable to fulfill your request as submitted.

I have read and understand Fernbank Museum's Martinis & IMAX® Group Policy.

Group Leader's Signature: \_\_\_\_\_ Date: \_\_\_\_\_