



**2020 ORDER FORM**

**CONTACT INFO:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

BEST CONTACT NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**WRISTBAND ORDER INFORMATION:**

|            |                 | <u>QTY</u> |   |              |   | <u>TOTAL</u>    |
|------------|-----------------|------------|---|--------------|---|-----------------|
| Per Person | <u>ALL WEEK</u> | _____      | x | \$ 300.00    | = | \$ _____        |
| Per Person | TUES            | _____      | x | \$ 50.00     | = | \$ _____        |
| Per Person | WED             | _____      | x | \$ 50.00     | = | \$ _____        |
| Per Person | THURS           | _____      | x | \$ 75.00     | = | \$ _____        |
| Per Person | FRI             | _____      | x | \$ 75.00     | = | \$ _____        |
| Per Person | SAT             | _____      | x | \$ 75.00     | = | \$ _____        |
|            | <b>TOTAL</b>    | _____      |   | <b>TOTAL</b> |   | <b>\$ _____</b> |

WRISTBANDS WILL BE AVAILABLE JULY 1, 2020: PREFERRED METHOD OF RECEIVING:

MAIL: \_\_\_\_\_ WILL CALL: \_\_\_\_\_ PICKUP AT OFFICE: \_\_\_\_\_

Checks Payable to Hot August Nights - No Checks Accepted After July 15, 2020

CHECK # \_\_\_\_\_ CASH \$ \_\_\_\_\_

(Visa/Mastercard Accepted)

CREDIT CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ BILLING ZIP CODE \_\_\_\_\_

PHONE ORDER TAKEN BY \_\_\_\_\_ DATE \_\_\_\_\_

**HOT AUGUST NIGHTS**  
**1425 E. GREG STREET, SPARKS, NV 89431**  
**phone # (775) 356-1956 fax # (775) 356-1957**

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**NO REFUNDS OR CANCELLATIONS AFTER JULY 1, 2020 - ALL CANCELLATIONS WILL BE CHARGED A \$10.00 PROCESSING FEE**

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