

ASSOCIATION OF CATHOLIC TEACHERS, LOCAL 1776  
1700 SANSOM STREET – SUITE 903,  
PHILADELPHIA, PA 19103

MOVIE TICKET  
ORDER FORM

Date \_\_\_\_\_

Name of  
Member/Retiree \_\_\_\_\_

I wish to purchase the following tickets:

QTY

\_\_\_\_\_ AMC TICKETS @ \$10.50 EACH = \_\_\_\_\_

\_\_\_\_\_ REGAL TICKETS @ \$9.25 EACH = \_\_\_\_\_

Total Amount Enclosed: \$ \_\_\_\_\_

*PLEASE ENCLOSE A SELF-ADDRESSED STAMPED  
ENVELOPE WITH YOUR TICKET REQUEST. THANK YOU.*