Christmas in Hershey 2017 Seasonal Corporate Order Form

Rates valid for groups of 20 or more pre-purchased admission tickets.

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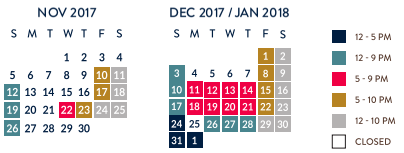
GROUP ARRIVAL DATE (if known) / / Refer to our Operational Calendar for dates and hours of operation.	ACCOUNT NUMBER (if known)		ORDER NUMBER (internal use only)	
GROUP NAME	GROUP CONTACT NAME			
ORGANIZATION MAILING ADDRESS (no PO Boxes)	CITY	STATE	ZIP CODE	COUNTY
PRIMARY PHONE ( )	SECONDARY PHONE ( )		GROUP FAX ( )	
EMAIL ADDRESS (enter email address for email order confirmation)	☐ Yes, I am at least 18 years old. Please register me to receive email updates about group opportunities at *Hersheypark*. ☐ I prefer NOT to receive email updates. *Your privacy is important to us; please visit HersheyPA.com to view our privacy policy.*			

2017 Christmas Candylane Operating Calendar

HERSHEYPARK® CHRISTMAS CANDYLANE®



2 Hersheypark Christmas Candylane®

Rates valid for pre-purchased orders received with FULL payment **a minimum of 2 weeks** prior to group visit date.

Group Admission Rates for 20 or More Purchased Admissions						Total Cost
Ticket Type	Gate Rate	Group Rate	Amusement Tax	Quantity	Your Cost	
All Ages (Ages 3 and over)	$24.85	$18	$0.85		$18.85	$
***Hersheypark* Pre-Paid Parking Voucher**	$9				$9	$

$0.85 is a Derry Township Amusement Tax. Exemption certificates are not valid.

Tickets

Hersheypark Christmas Candylane & *Hershey Sweet Lights* are rain or shine events. In the event of inclement weather, rides and/or attractions may operate on a limited schedule.

Tickets are non-refundable and non-transferable. ALL SALES ARE FINAL. Admission tickets are valid for the 2017 *Hersheypark Christmas Candylane* & *Hershey Sweet Lights* seasons only.

Additional parking fee of $9 per vehicle will apply.

Minimum 4 admission tickets required to add-on.

Shipping & Delivery

Shipped orders will be delivered by UPS, signature required.

It is recommended to pre-purchase admissions a minimum of 2 weeks prior to visit date for processing, delivery, and distribution of admission tickets.

Remit Forms To:

Mail your organized check payable to:
***Hersheypark* Groups**
108 Chocolateworld Way,PO Box 866
Hershey, PA 17033

Call to pre-purchase with a credit card
1-800-242-4236
Monday - Friday • 8 AM - 4 PM

FAX credit card orders to:
717-534-3153

3 Hershey Sweet Lights®

Rates valid for pre-purchased orders received with FULL payment **a minimum of 2 weeks** prior to group visit date.
Hershey Sweet Lights is open daily from November 10 - January 1. Please refer to the calendar on the reverse side for hours of operation.

Ticket Type	Group Rate	Amusement Tax	Your Cost	Quantity	Total Cost
***Sweet Lights* Car (Mon-Thurs)** No group minimum if purchased with *Christmas Candylane* group admissions.	$17.15	$0.85	$18		$
***Sweet Lights* Car (Fri-Sun)** No group minimum if purchased with *Christmas Candylane* group admissions.	$24.15	$0.85	$25		$
***Sweet Lights* Van** 9-15 or more passengers in vehicle.	$34.15	$0.85	$35		$
***Sweet Lights* Mini-Bus** 16 or more passengers in vehicle.	$49.15	$0.85	$50		$
Sweet Lights* Bus 27 or more people visiting Monday-Thursday.	$99.15	$0.85	$100		$
Sweet Lights* Bus 27 or more people visiting. Friday, Saturday, Sunday & Holidays.	$174.15	$0.85	$175		$

$0.85 is a Derry Township Amusement Tax. Exemption certificates are not valid.

*An additional fee of $50 per bus will be charged upon arrival for buses WITHOUT a pre-purchased *Sweet Lights* Bus Voucher.

Bus pre-purchased rates only. Voucher must be presented on visit date.
Purchases made upon arrival will reflect an additional charge of $50 per bus.

Order Total $

5 Payment Information - Full payment must accompany all orders.

(Make checks payable to *Hersheypark*) **Personal checks & purchase orders are NOT accepted payment methods**
☐ Enclosed Cashier's Check/Money Order/Organization Check ☐ Credit Card (All major credit cards accepted)

CREDIT CARD ACCOUNT NUMBER

EXPIRATION DATE (MONTH / YEAR)

BILLING ZIP CODE*

*Credit Card Billing Zip Code required for ALL credit card orders. Payment cannot be processed without confirmed billing zip code.

Authorized Signature
Signature required for payment authorization. Orders & rates will not be accepted without payment authorization.

X _____