



# 2017 Seasonal Group Order Form

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

<b>1</b>	
GROUP ARRIVAL DATE (if known) / / Refer to our Operational Calendar for dates and hours of operation.	ACCOUNT NUMBER (if known)
GROUP NAME	ORDER NUMBER (internal use only)
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)	<input type="checkbox"/> Yes, I am at least 18 years old. Please register me to receive email updates about group opportunities at Hersheypark. <input type="checkbox"/> I prefer NOT to receive email updates. <i>Your privacy is important to us; please visit HersheyPA.com to view our privacy policy.</i>

2 <b>Hersheypark In The Dark<sup>SM</sup></b>						
Rates valid for pre-purchased orders received with FULL payment <b>5 business days</b> prior to group visit date. <b>HOLD ORDER</b>						
Rates valid for pre-purchased orders received with FULL payment <b>a minimum of 2 weeks</b> prior to group visit date. <b>SEND ORDER</b>						
Group Admission Rates for 20 or More Purchased Admissions						Total Cost
Ticket Type	Gate Rate	Group Rate	Amusement Tax	Quantity	Your Cost	
<b>Regular</b> (Ages 9-54)	\$38.85	\$30	\$0.85		\$30.85	\$
<b>Junior</b> (Ages 3-8) <small>Ages 2 and younger are FREE</small>	\$28.85	\$22	\$0.85		\$22.85	\$
<b>Senior</b> (Ages 55+)	\$28.85	\$22	\$0.85		\$22.85	\$
<b>Hersheypark Meal Ticket</b> <small>Choose one meal selection at one of our participating food venues</small>		\$10.60			\$10.60	\$
<b>Hersheypark Pre-Paid Parking Voucher</b>		\$9			\$9	<b>Order Total</b> \$
<b>2017 Hersheypark In The Dark Walk-Up Rates</b> <small>\$33.85 (Regular) and \$23.85 (Jr/Sr)</small> <small>For purchases made less than 2 business days prior to group visit date and ALL purchases made upon arrival.</small>						\$0.85 is a Derry Township Amusement Tax. Exemption certificates are not valid.

### Tickets

Hersheypark In The Dark is a rain or shine event.

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 In The Dark season only.

Complimentary escort tickets are NOT available with purchases for this event.

Additional parking fee of \$9 per vehicle will apply.

Minimum 4 admission tickets required to add-on.

### 2017 Seasonal Calendar

## HERSHEYPARK IN THE DARK<sup>SM</sup>

**OCTOBER 2017**

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

- 5 - 10 PM
- 10 AM - 10 PM
- 12 - 9 PM
- CLOSED

### 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.

Orders placed less than 5 business days prior to group visit date will be held at Hersheypark Ticketing Services Building for pick-up upon arrival.

### 3 Delivery Information

SEND ORDER (10 or more business days)

If pre-purchasing admission tickets, it is recommended to purchase a minimum of 2 weeks prior to visit date. All orders are sent by UPS Signature Required. Hersheypark is not responsible for lost or stolen tickets.

HOLD ORDER (at least 5 business days)

Orders will be available for pick up at Ticketing Services Building during operational hours.

Mail your organized check payable to:  
**Hersheypark Groups**  
 108 Chocolate World 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**

### 4 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\*

**Authorized Signature**

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

X \_\_\_\_\_

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