

Discount Ticket Order Form

Order Date	
 Date Received	

Please indicate which locatio	n: □Grand 14 Cinema, Myr □Millstone Cinema, Fayo □Sun Valley, Indian Tra	etteville NC	☐The Pointe, Wilmington NC ☐Redstone, Indian Land SC
Customer Information			
Company:		_ Phone #	t:
Contact: Delivery Address:		 Fax #: 	
City: St	ate: Zip:	Email:	
Premium Discount Ticket • No expiration date	one admission restrictions*		ach x = set minimum) = \$
*Valid admission: On rare occasions films may be rest events or private screenings. Tickets			
SHIPPING •	option 1* 2 to 3 busines option 2* 1 to 2 busines No PO Box; Signature required	s days \$18.00 in	hipping must be ncluded with each order!
Orders received by 1pm will be	processed the same day; except	for Bank and Re	ligious holidays. TOTAL DUE \$
Payable by mail: Check or Mo	oney Order Ship to: (If diffe	erent from abov	e) Notes/Special Instructions
Please mail order form and payer to: Stone Theatres Attn: Meredith Brooks 5970 Fairview Rd., Su Charlotte, NC 28210			

For more information, movies, and show times please visit our website at:

WWW.STONETHEATRES.COM

Get More Out Of Life. Go See A Movie.