



Aquarium of the Pacific 2024 Prepaid Ticket Order Form

Thank you for your interest in the Aquarium of the Pacific's prepayment program. Please call Group Sales, at (562) 951-1660 with any questions.

For credit card payments, **fax** this completed form along with our **credit card authorization form** and **a copy of the front and back of the credit card** to our Finance Department (562) 951-5365 **Attn: Olivia Archuleta**. Or email your order form to the Group Sales Coordinator, Kianna at kgicale@lbaop.org and **call** Olivia at (562) 951-3135 to give your card number over the phone. Do not email out your credit card info.

For payments by company check, mail this form with any residual tickets and payment to:

Aquarium of the Pacific
Attn: Group Sales
320 Golden Shore, Ste. 150
Long Beach, CA 90802

Once payment is received, please allow 10 business days for delivery of tickets.

Company Name: _____ Contact Name/Title: _____
Address: _____
City: _____ State: _____ Zip: _____
Email Address: _____
Phone: (____) _____ Fax: (____) _____

The Aquarium of the Pacific allows prepaid tickets ***purchased in 2023 expiring in 2024*** to be returned once during the calendar year in exchange for a credit that may be applied toward a new ticket order. Please note that refunds are not available.

Number of **returned** adult tickets _____ @ **\$34.95** = \$ _____

Number of **returned** child tickets _____ @ **\$23.95** = \$ _____

Total number of **returned** tickets _____ Total return = \$ _____

Tickets are valid one year from the date of purchase. A minimum of 25 tickets, any combination, is required per order. Payment and any returned tickets must be received before the order will be processed.

Prepaid order, payment, and returned tickets received **Jan 1 - May 31 or Sept 1 - Dec 31, 2024:**

Number of adult tickets _____ @ **\$35.95** = \$ _____

Number of child tickets _____ @ **\$23.95** = \$ _____

Total number of tickets _____ Total cost = \$ _____

Total order \$ _____ minus Total return \$ _____ = Total payment \$ _____

Prepaid order, payment, and returned tickets received **June 1 - Aug 31, 2024:**

Number of adult tickets _____ @ **\$39.95** = \$ _____

Number of child tickets _____ @ **\$26.95** = \$ _____

Total number of tickets _____ Total cost = \$ _____

Total order \$ _____ minus Total return \$ _____ = Total payment \$ _____

☐ Yes, please send an invoice for my accounting records to the fax/e-mail address I've listed below:

☐ Yes, I would like a name/phrase printed on my tickets:

_____ (Maximum 19 characters)

(Example: ABC Company)

You must make a reservation before visiting the Aquarium of the Pacific. Go to [pacific.to/reservations](https://www.pacific.to/reservations).