



## Student/Teacher Discount Form

**Deadline for tickets to be Mailed: January 15, 2024**

**Deadline for tickets to be picked up at Gate 12: February 12, 2024**

Download and save to your computer before completing

Once complete, email to [agventures@farmshow.org](mailto:agventures@farmshow.org)

Provide number of students and number of adults (include teachers, bus drivers, chaperones) and the total number of tickets requested.

Tues., Feb. 13: Number of students \_\_\_\_\_ Number of adults \_\_\_\_\_

Wed., Feb. 14: Number of students \_\_\_\_\_ Number of adults \_\_\_\_\_

Thurs., Feb. 15: Number of students \_\_\_\_\_ Number of adults \_\_\_\_\_

**\$15 Per Ticket - Total Cost: \$ \_\_\_\_\_**

### General Information:

- All tickets **must be requested no later than January 29, 2024 to** receive the discounted price
- No refunds
- All teachers/chaperones/bus drivers **MUST** have a ticket to enter World Ag Expo®
- Form must be complete with teacher's contact information and an accounting department representative
  - World Ag Expo® does **NOT** need additional Purchase Order paperwork, only provide P.O. Number
- Do **not** encourage students to collect promotional materials from exhibitors, unless used for class assignment
- Payment must be received within 30 days of World Ag Expo®, if not paid by March 13, 2024 you will be charged **FULL** admission fee of \$20 per ticket
- Ticket Form or Invoice **MUST** be included with payment
- Checks made out to the International Agri-Center® or World Ag Expo®, Mail: 4500 S. Laspina St., Tulare, CA 93274
- If you do not receive an invoice for your request, your form has not been processed

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Class/Club: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

2<sup>nd</sup> Teacher: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Accounting Dept. Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Do you need an invoice? ☐ Yes ☐ No      Payment: ☐ Cash ☐ Credit Card ☐ Check # \_\_\_\_\_ Purchase Order# \_\_\_\_\_

Name on Card: \_\_\_\_\_ Card Number: \_\_\_\_\_

Exp: \_\_\_\_\_ CVV: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have read this form in its entirety and agree to all terms, including mandated wrist bands with teacher contact information. I will provide payment of cash, check, or credit card no later than March 13<sup>th</sup> or be charged full admission fee per ticket.

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Questions? Contact Brittany Howton: 559.688.1030. Payment and Ticket Request accepted only with completed Student/Teacher Discount Form. Return to: 4500 S. Laspina St., Tulare, CA 93274 | [brittany@farmshow.org](mailto:brittany@farmshow.org)