



**MIAMI INTERNATIONAL FILM FESTIVAL 2016
MDC Class Ticket Order Form**

We would like to offer you and your class the opportunity to attend a recommended screening (see attached film list) at MiamiFF 2015. Please note all requests must be received by **Friday, February 19, 2016.**

Please find the **FILM NAME + SCREENING DATE** for each individual screening listed in the Ticket Guide. You may order for multiple classes on a single form and use additional forms if necessary. Best effort is made to accommodate requests. Alternate choice may be granted if 1st choice is not available. **Seating** is on a first come, first served basis. All ticketholders must be seated at least **15 minutes** before screening/event begins. All empty seats will be sold to Rush Line 10 minutes before screening. **Late arrivals are not guaranteed admittance.**

Class Title: _____
Reference #: _____

| Ticket Qty | 1st Choice | | Alternate Choice | |
|------------|------------|-------------------|------------------|-------------------|
| | Film Name | Date of Screening | Film Name | Date of Screening |
| | | | | |

Please explain briefly how this film will relate to the content or thematics of your class:

Class Title: _____
Reference #: _____

| Ticket Qty | 1st Choice | | Alternate Choice | |
|------------|------------|-------------------|------------------|-------------------|
| | Film Name | Date of Screening | Film Name | Date of Screening |
| | | | | |

Please explain briefly how this film will relate to the content or thematics of your class:

YOUR INFORMATION

Instructor Name: _____
 Title: _____
 Campus: (Circle) North Kendall Wolfson Homestead
 West Medical Hialeah InterAmerican
 Email address: _____
 Phone #: _____
 Office address: _____

Please circle your preferred delivery method:

| | |
|-----------------------------------|--|
| Campus Mail to your address above | Pick up at Festival Office: Freedom Tower 4th fl. between Feb 23-26 |
|-----------------------------------|--|

Return this completed form to Sarah Roffman, Associate Director, Activation sarah@miamifilmfestival.com
 or by mail: Sarah Roffman, Miami International Film Festival, Freedom Tower, 600 Biscayne Blvd. 4th floor, Miami FL 33132