

## Ticket Refund

*(Corona crisis 2020)*

**Performance:** .....

**Date:** .....

**Order number** (6 or 7 digits): .....

<b>Name &amp; Surname: *</b>	
<b>Street *</b>	
<b>Postal Code &amp; City *</b>	
<b>Telephone Number / Email Address: *</b>	
<b>Credit Voucher (valid for 3 years)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>or exchange for another performance:</b>	Date:                      Performance:
<b>or bank account number / IBAN:</b>	

\* fields marked with an asterisk are compulsory

Please send the completed form to [vorverkauf@staatstheater-wiesbaden.de](mailto:vorverkauf@staatstheater-wiesbaden.de)

HESSESCHES  
**STAATSTHEATER**  
WIESBADEN