



Toby's
Dinner & Show

Friday
Sept. 28, 2018

Cost:
\$89 per person

This Special Event & Package Includes:

Round Trip Luxury Motor Coach, AIN'T MISBEHAVIN "LIVE" @ Toby's Dinner & Show with intimate seating, Taxes & Tipping!
 Motor Coach Departs promptly at 4:30 PM - Boarding will start at 4:00PM / Return approx. 11:00PM
Pick-up/Drop-off Location: Oxon Hill MD. Park & Ride - 6600 Oxon Hill Road, Oxon Hill, MD. 20745

Buffet Dinner: 6-7:30pm (Special beverage orders at own expense)-Show starts at: 8:00pm
 *** Northern MD Pickup location will be determined and based on a min. of 10 participating passengers***

Booking Code: CSTAM9/18

Ticket purchase time is limited, so act fast!

'This joint will be jumpin' with Ain't Misbehavin', one of the most popular, well-crafted revues of all time and a Tony Award winner for Best Musical. The inimitable Thomas "Fats" Waller rose to international fame during the Golden Age of the Cotton Club with his infectious swing music. Ain't Misbehavin' evokes the delightful humor and powerful energy of this 'American original' with music made famous from uptown clubs to Tin Pan Alley to Hollywood! **Note: Fog, haze and strobe effects may be used in this production.**

Terms Per Person: FULL PAYMENT IS DUE AT BOOKING

* All sales are final and under 100% Penalty at purchase, however you are allowed to transfer only with a replacement name *
 Forms of payment accepted: Certified Check, Personal Check, Money Order or Credit Card (CC- Add 2.5% processing fee)

Travel arrangements by: Champion Services Travel - (301) 686-0970 / M-F, 9a - 5p EST
PO Box 44140, Fort Washington, MD 20744 / www.all4champion.com

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Name: _____ M ____ F ____ Payable to: **Champion Services Travel (CST)**
 PO Box 44140, FT. Washington, MD 20744

Address: _____ # of travelers depositing: _____ Deposit: \$ _____ BK Code: **CSTAM9/18**

City _____ State _____ Zip _____ Home: _____

Cell: _____ Special Needs _____ (some needs may not be accommodated)

E-mail: _____ Credit Card #: _____ / _____ / _____ / _____ SC _____

Expiration Date: ____ / ____ / ____ Name on CC: _____ Signature: _____
Add 2.5% processing fee

Travel Partner/s: _____ / _____ / _____

Emergency Contact: _____ Phone: _____