

**Letter of Authorisation**

To be used when original purchaser of the mail or telephone order will not be in attendance and therefore unable to produce their credit or debit card and wishes a third party to collect in their absence.

Details of original booker (please PRINT)

Name:

Reference Number :

Postcode:

Last four digits of card used to make payment with :

Contact phone number (just in case we need to contact you to verify any details) :

Show Name:

Show Date:

I authorise the person name below to collect tickets on my behalf. I confirm that all details given here are accurate and that if required Shakespeare's Globe may pass on this information to the card issuer.

Signature:

Details of Person Collecting on your Behalf:

Title :

Initials:

Surname: