

# [ARTIST NAME]

## August 2017

Sun	11th	[Venue Name]
Wed	14th	[Venue Name]
Thu	15th	[Venue Name]
Fri	16th	[Venue Name]
Sat	17th	[Venue Name]
Sun	18th	[Venue Name]
Tue	20th	[Venue Name]
Wed	21st	[Venue Name]
Fri	22nd	[Venue Name]
Sat	21st	[Venue Name]

Pre-sale and Group Tickets: [www.yourwebsite.com](http://www.yourwebsite.com)

Sponsored by [Local Company/Group]. Tickets are non-refundable, rain or shine.  
For more information, please visit website: [www.yourwebsite.com](http://www.yourwebsite.com), or contact local box office.

UPLOADABLE  
LOGO OR  
IMAGE HERE  
(OPTIONAL)

**UPLOADABLE LOGO  
OR  
IMAGE HERE  
(OPTIONAL)**

**[Artist/Group Name]**

**UPLOADABLE LOGO  
OR  
IMAGE HERE  
(OPTIONAL)**

**[Artist/Group Name]**

**For more information:**

**[www.yourwebsite.com](http://www.yourwebsite.com)**

**UPLOADABLE  
LOGO OR  
IMAGE HERE  
(OPTIONAL)**

Your Address Here

City, ST ZIP

**000-000-0000**

(Your Locator Here)