

SUBSCRIPTION ORDER FORM

Subscribe today for the best seats at the best prices! Choose the packages you prefer and complete the order form below.

If you choose any of our Seated Subscriptions you must also select the appropriate options on Page 2.

Then return this entire form to: **OLD TOWN PLAYHOUSE BOX OFFICE, PO Box 262, Traverse City, MI, 49685.**

Have questions or need help with your form? Call the Box Office at (231) 947-2210 ext 2.

Seated Subscription prices include \$6 Processing Fee

Quantity

Price Ea

Total Price

SEATED SUBSCRIPTIONS	9-SHOW SEATED	<input type="checkbox"/>	X	\$166	=	\$ _____
	MainStage + Studio: All Nine Shows!					
	5-SHOW SEATED	<input type="checkbox"/>	X	\$116	=	\$ _____
	The Five MainStage Shows					
	4-SHOW SEATED	<input type="checkbox"/>	X	\$61	=	\$ _____
	The Four Studio Shows @ the Depot					

Select Preferred Day & Seats on Page 2



FLEX SUBSCRIPTION	# of Flex Vouchers: <input type="checkbox"/>	X \$25 = \$ _____	+ \$6 =	\$ _____
	(minimum of 4 required)		Processing Fee	
<p>Can't go to all 5 MainStage shows? Use FLEX Vouchers for any show and in any amount you choose. Call the Box Office each time you wish to cash some in.</p> <p>EXAMPLE: If you buy 6 vouchers (total price \$156), you may redeem them for 2 tickets for each of 3 shows <u>or</u> invite 5 friends and redeem them all for 1 show <u>or</u> any other combination. The FLEXibility is up to you!</p> <p><i>*Flex Seating based on availability. Good for all MainStage shows this season with free exchanges.</i></p>				

Tax Deductible Donation: \$ _____
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Sum of Total Prices Above: \$ _____
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<p><input type="checkbox"/> Have tickets at Will Call <input type="checkbox"/> Mail my tickets <small>(Check one box. If none checked, your tickets will be at Will Call.)</small></p> <p>Name _____</p> <p>Mail Address _____</p> <p>City, State, ZIP _____</p> <p>Phone _____</p> <p>Email _____ <small>Allows us to send you important information such as your order confirmation.</small></p>	<p><input type="checkbox"/> My check is enclosed, payable to Old Town Playhouse</p> <p><input type="checkbox"/> Gift Certificate is enclosed for complete or partial payment</p> <p>Please charge my credit card:</p> <p style="text-align: center;"><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> Amex</p> <p>Name on Card _____</p> <p>Card # _____</p> <p>Expiration Date _____ Security Code _____</p> <p>Signature _____</p>
<p>Your credit card will be charged or your check(s) cashed when we process your order. We process subscriptions in the order received for each Primary Day with tickets available in time for the first performance. All plays, dates & prices subject to change.</p>	

SEATED SUBSCRIPTION OPTIONS

SELECT YOUR PRIMARY DAY (MainStage and/or Studio)

Your Primary Day is the day and week you prefer to attend. Please select one from the list below. When we book your seated subscriptions, you will then be able to select this same Primary Day next season. *At any time during this season you may exchange any of your tickets for a different day at no extra charge (subject to availability).*

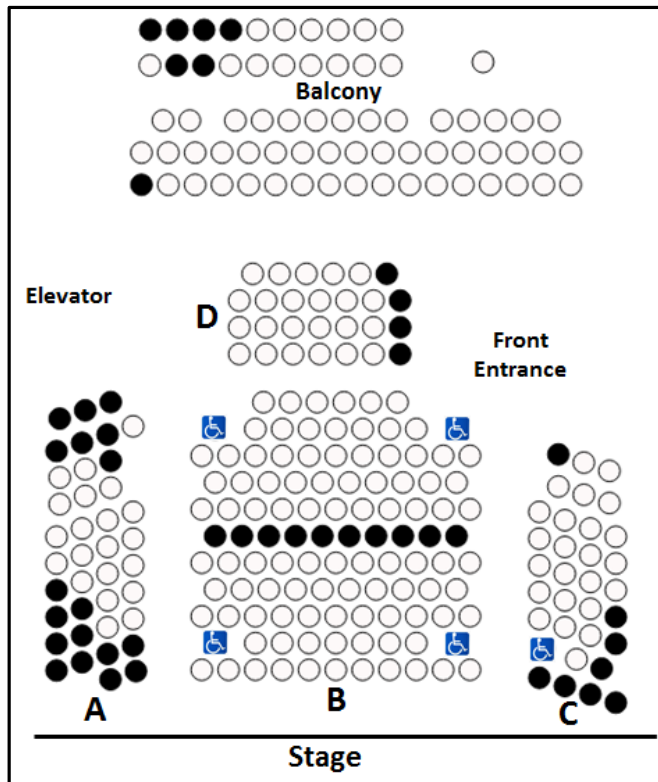
Opening Weekend							
<input type="checkbox"/>	Fri. 7:30 pm	<input type="checkbox"/>	Sat. 7:30 pm	<input type="checkbox"/>	Sun. 2:00 pm		
Second Week							
<input type="checkbox"/>	Thur. 7:30 pm	<input type="checkbox"/>	Fri. 7:30 pm	<input type="checkbox"/>	Sat. 7:30 pm	<input type="checkbox"/>	Sun. 2:00 pm
Third Week							
<input type="checkbox"/>	Thur. 7:30 pm	<input type="checkbox"/>	Fri. 7:30 pm	<input type="checkbox"/>	Sat. 7:30 pm		

 Check Box if Wheelchair Space Required

SELECT YOUR PREFERRED PRIMARY SEAT(S) (MainStage only)

On the seating chart to the right, circle the area(s) where you prefer to sit (black seats not available). If you circle more than one area, number them in priority order. We will strive to seat you as close to those seats as possible. Plus, you will have first chance for those same Primary Seats next season.

NOTE: The front row in sections A, B, and C is Row A. The front row in section D is Row M. The front row in the balcony is Row AA.



Area left intentionally blank for office use.

AISLE Check Box if Aisle Seating Preferred

Please seat us with:
