SUBSCRIBER INFORMATION Name Primary Phone Address Secondary Phone City State Zip Email

SEASON SUBSCRIPTIONS

1. Select & Circle your SERIES CODE choice from the table below.

SERIES CODE		LEGALLY BLONDE	POLAROID STORIES	VAUD	ROMEO & JULIET	HEAD OVER HEELS	NEW DIRECTIONS FESTIVAL
01	Sunday Preview	Sun Oct 2 (1:30p)	Sun Oct 23 (1:30p)		Sun Feb 26 (1:30p)	Sun April 9 (1:30p)	
02	Wednesday Preview	Wed Oct 5 (7:30p)	Wed Oct 26 (7:30p)		Wed March 1 (7:30p)	Wed April 12 (7:30p)	
03	Opening Nights	Thurs Oct 6 (7:30p)	Thurs Oct 27 (7:30p)	Thurs Dec 1 (7:30p)	Thurs Mar 2 (7:30p)	Thurs April 13 (7:30p)	Fri April 21 (7:30p)
04	Friday Evenings	Fri Oct 7	Fri Oct 28	Fri Dec 2	Fri Mar 3	Fri April 14	Fri April 21
	(Package 1)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)
05	Friday Evenings	Fri Oct 14	Fri Nov 4	Fri Dec 2	Fri Mar 17	Fri April 21	Fri April 28
	(Package 2)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)
06	Saturday Matinée	Sat Oct 15	Sat Nov 5	Sat Dec 3	Sat Mar 4	Sat April 22	Sat April 22
	(Package 1)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)
07	Saturday Matinée	Sat Oct 15	Sat Nov 5	Sat Dec 3	Sat Mar 18	Sat April 22	Sat April 29
	(Package 2)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)
08	Saturday Evenings	Sat Oct 8	Sat Oct 29	Sat Dec 3	Sat Mar 4	Sat April 15	Sat April 22
	(Package 1)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)
09	Saturday Evenings	Sat Oct 15	Sat Nov 5	Sat Dec 3	Sat Mar 18	Sat April 22	Sat April 29
	(Package 2)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)	(7:30p)
10	Sunday Matinée	Sun Oct 9	Sun Oct 30	Sun Dec 4	Sun Mar 19	Sun April 16	Sun April 23
	(Package 1)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)
11	Sunday Matinée	Sun Oct 16	Sun Nov 6	Sun Dec 4	Sun Mar 19	Sun April 23	Sun April 30
	(Package 2)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)	(1:30p)

- 2. Select your Season below.
- 3. Under the package you selected, write the number of subscriptions you want for each price & total up the costs. (Remember, PREVIEW price category is only available for Series o1 & o2.)

SEASON SUBSCRIPTION ORDER FORM

	☐ Full	Season	☐ Previews (ART Only)		
ADULT	@ \$136	=\$			
SR CITIZEN / UA EMPLOYEE/ALUMNI	@ \$128	=\$	@ \$72	=\$	
STUDENT	@ \$64	=\$			
ORDER TOTAL		=\$			

ADDITIONAL TICKETS – Complete the ADDITIONAL TICKET ORDER FORM to the top right and circle the added show date(s) on the SERIES CODE table.

• Add additional seats to any performance.

SUBSCRIPTION ORDER FORM

FLEX SEASON SUBSCRIPTIONS

Flex Season Subscribers follow the steps below to complete your order.

- 1. Select FOUR to SIX productions you want to attend.
- 2. Circle the desired dates on the SERIES CODE table to the left. (You may order as many tickets as you like to each production.)
- 3. Write in the number of tickets you want to purchase per production on the ORDER form below.
- 4. Add the TOTAL cost in each row for all tickets purchased to each individual production and enter in
- 5. Add the cost for all tickets purchased for all productions and enter in the ORDER TOTAL box.

FLEX SEASON					
PRODUCTION	PREVIEW	ADULT	SR CITIZEN/ EMPLOYEE/ ALUMNI	STUDENT	TOTAL
☐ LEGALLY BLONDE	@ \$19	@ \$28	@ \$26	@ \$12	=\$
□ POLAROID STORIES	@ \$17	@ \$26	@ \$24	@ \$12	=\$
□VAUD		@ \$12	@ \$12	@\$8	=\$
☐ ROMEO & JULIET	@ \$17	@ \$26	@ \$24	@ \$12	=\$
☐ HEAD OVER HEELS	@ \$19	@ \$28	@ \$26	@ \$12	=\$
□ NEW DIRECTIONS FESTIVAL		@ \$16	@ \$16	@ \$8	=\$
				ORDER TOTAL	=\$

COMPLETE YOUR ORDER BELOW

- 1. ADD the ORDER TOTALS from both ORDER FORMS and enter in BOX 1
- 2. ENTER a 100% deductible contribution in BOX 2 (Contributions of \$35 or more are acknowledged in playbills.)
- 3. ADD the HANDLING FEE noted in BOX 3.
- 4. Add all boxes together and enter the total in BOX 4. Provide your credit card information in the PAYMENT box below or pay by check as noted.

Account Number

Signature

Вох 1	\$
Box 2	\$
Вох 3	\$ 10.00
Box 4	\$

Exp. Date

SEATING
PREFERENCES

1.Closer to: 2.Level: ☐ Aisle ☐ Floor Center ■ Balcony

3. Seating prefrence:

- ☐ Front (Rows A-D) ☐ Middle (Rows E-H)
- ☐ Back (Rows |-M)
- 4. Accessibility Seating
- Wheelchair #
- WC Companion Seat #
- ☐ Visual Impairment Hearing Impairment

Office	DOR	Series
Office Use Only	PID	

PAYMENT

☐ Check payable to: University of Arizona □ VISA □ Mastercard □ AmEx □ Discover