



# 2012 Season Subscriptions



## What You Get

**Guaranteed best seats**

**Extra Savings** off the price of individual tickets

**Exchange privileges & FLEX Plan option**

## How To Order

- 1) Choose Premium, Standard or Child.
- 2) Choose your dates from the chart below or choose your dates later (Seating based on availability.)
- 3) Fill in your contact and payment information. Let us know if you have any special needs or requests regarding seating (for example, wheelchair accessible or an aisle seat.)

1 Subscription Plans		Donation		
Premium	Qty: _____ x \$110 = \$ _____	I would like to make a tax-deductible donation to TriArts Sharon Playhouse.		
Standard	Qty: _____ x \$ 70 = \$ _____			
Child	Qty: _____ x \$ 40 = \$ _____			
Total \$ _____		Donation \$ _____	Service Fee \$ 6.00	Grand Total \$ _____

2 Choose Date	Performance Day	Time	Whorehouse	Altar Boyz	Sound of Music
<input type="checkbox"/>	1 <sup>ST</sup> Thursday	7:00 PM	June 28	July 26	August 9
<input type="checkbox"/>	1 <sup>ST</sup> Friday	8:00 PM	29	20	10
<input type="checkbox"/>	1 <sup>ST</sup> Saturday	8:00 PM	30	21	11
<input type="checkbox"/>	1 <sup>ST</sup> Sunday	5:00 PM	July 1	22	12
<input type="checkbox"/>	2 <sup>ND</sup> Friday	8:00 PM	6	27	17
<input type="checkbox"/>	2 <sup>ND</sup> Saturday	8:00 PM	7	28	18
<input type="checkbox"/>	2 <sup>ND</sup> Sunday	5:00 PM	8	29	19
<input type="checkbox"/>	<b>FLEX Plan option</b> – I'll choose my dates later (subject to availability.)				

3 Contact & Payment Information (Please Print)			
FIRST NAME		LAST NAME	
BILLING ADDRESS			
CITY		STATE	ZIP CODE
DAYTIME TELEPHONE (    )		EVENING TELEPHONE (    )	
E-MAIL ADDRESS			
METHOD OF PAYMENT <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Check (payable to: <b>TriArts Sharon Playhouse</b> )			
CREDIT CARD NUMBER		EXPIRATION DATE	THREE DIGIT SECURITY CODE
NAME AS IT APPEARS ON THE CARD			
SPECIAL NEEDS OR REQUESTS			
<b>DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY</b>			
DATE RECEIVED	PAY TYPE	DATE PROCESSED	TICKETS ISSUED

Mail this form with payment to: **TriArts Sharon Playhouse, Attn. Box Office, PO Box 1187, Sharon, CT 06069**

Questions? E-mail [info@triarts.net](mailto:info@triarts.net) or Call (860) 364-7469 Ext. 100