

2017/18 Subscription Order Form

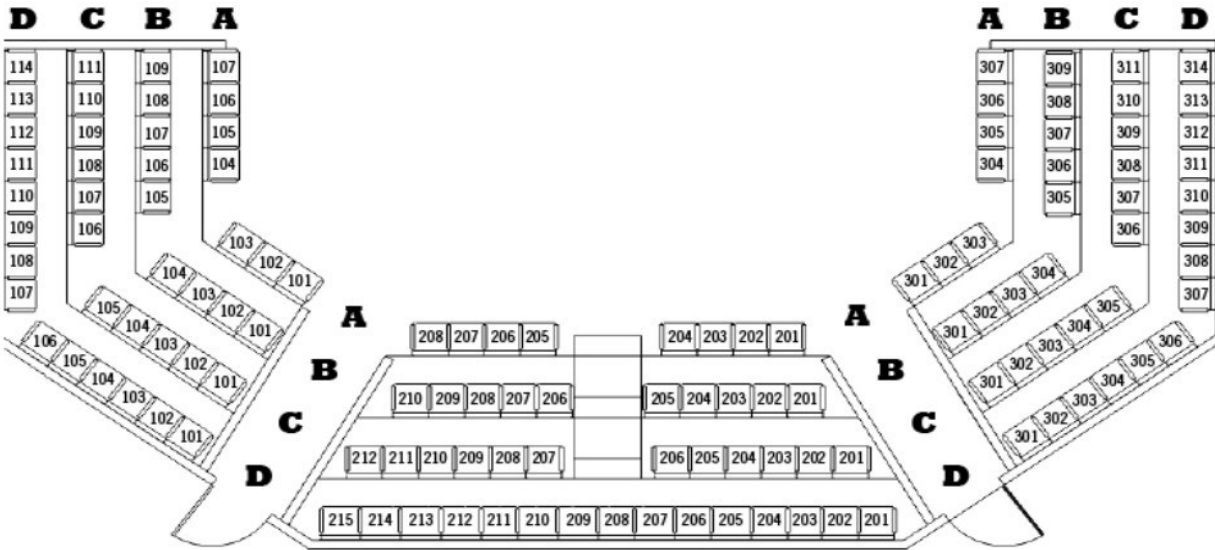
Please complete all information and return to:
 Capital Stage
 2215 J Street
 Sacramento, CA 95816
 — or —
 subscribe online at capstage.org

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____
 Email: _____

MY TICKETS WILL BE:

LEFT AT WILL CALL

MAILED TO MY HOME



I require aisle seating I require wheelchair accessible seating I require front row seating

PLAN	PREVIEW	MIDWEEK	OPENING NIGHT	MATINEE	FLEX TICKET	FRI & SAT EARLYBIRD
YOU SAVE	9%	Up to 37%	24%	Up to 32%	Up to 20%	Up to 28%
PRICE	\$100	\$120	\$170	\$130	\$160	\$145
MARK <input checked="" type="checkbox"/> YOUR SERIES	<input type="checkbox"/> 1st Wed <input type="checkbox"/> 1st Thurs <input type="checkbox"/> 1st Fri	<input type="checkbox"/> 2nd Wed <input type="checkbox"/> 3rd Wed <input type="checkbox"/> 4th Wed <input type="checkbox"/> 5th Wed	<input type="checkbox"/> 2nd Thurs <input type="checkbox"/> 3rd Thurs <input type="checkbox"/> 4th Thurs <input type="checkbox"/> 5th Thurs	<input type="checkbox"/> Always the 1st Saturday (Includes post show reception)	<input type="checkbox"/> 1st Sun <input type="checkbox"/> 2nd Sun <input type="checkbox"/> 3rd Sun <input type="checkbox"/> 4th Sun <input type="checkbox"/> 5th Sun	<input type="checkbox"/> Pick your dates as you go or choose your dates in advance (Excludes Opening Night)
				<input type="checkbox"/> 2nd Sat <input type="checkbox"/> 3rd Sat <input type="checkbox"/> 4th Sat <input type="checkbox"/> 5th Sat		<input type="checkbox"/> 2nd Fri <input type="checkbox"/> 2nd Sat <input type="checkbox"/> 3rd Fri <input type="checkbox"/> 3rd Sat

① Season Ticket Price:
 Cost _____ x _____ people = \$ _____

② Add 5 show Parking Pass — \$15 = \$ _____

③ Add Holiday Show tickets —
 \$33.50 x _____ people = \$ _____
 \$28.50 x _____ people (Preview) = \$ _____

④ Here is my tax deductible contribution = \$ _____

⑤ Handling Fee — \$5 x _____ people = \$ _____

⑥ Total Due: Add line 1,2,3,4, and 5 = \$ _____

Payment Enclosed Check # _____

Credit Card Number: _____

Expiration Date: _____ CVV/CVC: _____

Authorized Signature: _____