

I WANT TO PICK MY OWN 2018/19 PACKAGE

BUT MISS OUT ON FULL SUBSCRIBER PERKS

NAME _____ PHONE _____

ADDRESS _____ EMAIL _____

1. PICK YOUR PACKAGE AND PRICING OPTIONS (check one)

- PICK-YOUR-OWN SUBSCRIBER PACKAGE** Choices include: **\$35/standard ticket**
 I want to see: 4 Shows 5 Shows 6 Shows **\$25/preview ticket**
\$55/opening night ticket

FLEX PASSES \$35/ticket

The ultimate in flexibility! You can pick your shows but you don't have to pick your dates until later.

I want _____ Passes (minimum of 4)

	DATE	QUANTITY	X	AMOUNT	=	TOTAL
Skeleton Crew	_____	_____		_____		_____
Small Mouth Sounds	_____	_____		_____		_____
Everybody	_____	_____		_____		_____
Teenage Dick	_____	_____		_____		_____
A Doll's House, Part 2	_____	_____		_____		_____
Wolf Play	_____	_____		_____		_____
The Revolutionists	_____	_____		_____		_____
It's a Wonderful Life: A Live Radio Play	DEC 2018	_____		_____		_____
Unexploded Ordnances	_____	_____		_____		_____

2. SEATING PREFERENCES:

- Call me to arrange seating

Let us know if you need specific accommodations to attend a performance.

Call: 503.241.1278 Email: boxoffice@artistsrep.org

3. MAKE A DONATION - YOUR GIFT MAKES ALL THE DIFFERENCE.

Ticket sales cover only 40% of the cost of our programs. Make a real impact with your tax-deductible gift.

I want to make a monthly contribution of _____ →

I would like to make a one-time gift of _____ →

4. COMPLETE YOUR ORDER by calling 503.241.1278, mailing this form with payment or stopping by the theatre (Tues-Sun, noon-6pm) 1515 SW Morrison, Portland OR 97205

I have enclosed a check payable to Artists Repertory Theatre.

Please charge my: Visa Mastercard Discover AMEX

CREDIT CARD NUMBER _____

EXPIRATION DATE _____

Handling fee: →

\$10

SIGNATURE _____

TODAY'S DATE _____

GRAND TOTAL →

Split Payment Plan - Commit now, complete your payment in two easy steps! Take advantage of this option by using your credit card to pay half now and the other half later. Half of the order total (including contributions) must be paid at the time the order is placed.

Please charge half now and half on June 1 or June 15

GIVE ME THE FULL SUBSCRIPTION PACKAGE

PLUS ALL THOSE PERKS!

NAME _____ PHONE _____

ADDRESS _____ EMAIL _____

SEASON SUBSCRIBER PACKAGE AND PRICING OPTIONS (CHECK ONE ON FORM)

PREMIUM SUBSCRIBER (includes all shows in our season - excludes bonus shows) - **\$280**

PREMIUM OPENING NIGHT SUBSCRIBER - \$385

(invitations to Opening Night celebrations with snacks and beverages - excludes bonus shows)

NEW! 35 CLUB SUBSCRIPTION - \$210

If you are 35 and under, you're eligible for the 35 CLUB! The club will have a sponsored cocktail hour before the FINAL WEEK TUESDAY performance of each production. Your season tickets will be held at the Box Office where you will have to show your ID to complete your order.

PREVIEW NIGHT SUBSCRIPTION - \$175

Be one of the first to see each show! (Choose dates from preview week only)

<p>1. PICK YOUR DATES (SEE PERFORMANCE CALENDAR) DATE</p> <p><input type="checkbox"/> I'll choose my dates later.</p> <p>Skeleton Crew _____</p> <p>Small Mouth Sounds _____</p> <p>Everybody _____</p> <p>Teenage Dick _____</p> <p>A Doll's House, Part 2 _____</p> <p>Wolf Play _____</p> <p>The Revolutionists _____</p> <p>It's a Wonderful Life: A Live Radio Play <u>DEC 2018</u></p> <p>Unexploded Ordnances _____</p>	<p>2. CHOOSE YOUR PACKAGE X QTY = TOTAL</p> <p><input type="checkbox"/> PREMIUM - \$280 _____</p> <p><input type="checkbox"/> OPENING - \$385 _____</p> <p><input type="checkbox"/> 35 CLUB - \$210 _____</p> <p><input type="checkbox"/> PREVIEW - \$175 _____</p> <p><input type="checkbox"/> IT'S A WONDERFUL LIFE: A LIVE RADIO PLAY - \$35 10 AND UNDER \$25 _____</p> <p><input type="checkbox"/> UNEXPLODED ORDNANCES - \$35 _____</p> <p style="text-align: right;">SUB-TOTAL: _____</p> <p>3. SEATING PREFERENCES: _____</p> <p><input type="checkbox"/> Keep my same seats from the 2017/18 season (must renew by May 15)</p> <p><input type="checkbox"/> Call me to arrange seating</p>
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Please charge my: Visa Mastercard Discover AMEX

Sub-Total from Above: → _____

CREDIT CARD NUMBER _____

EXPIRATION DATE _____

Handling fee: → \$10

SIGNATURE _____

TODAY'S DATE _____

GRAND TOTAL → _____

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Please charge half now and half on June 1 or June 15