

2017-2018 SUBSCRIPTION PACKAGES

CENTERSTAGE SUBSCRIPTION (4 SHOWS)

OLIVER - A CHRISTMAS CAROL - SISTER ACT - THE LITTLE MERMAID

_____ #ADULTS @ \$172.80
 _____ #SENIOR/STUDENT/MILITARY @ \$162.00
 _____ # CHILDREN (4-12) @ \$126.00

BROADWAY TRIO SUBSCRIPTION (SELECT ANY 3 SHOWS)

OLIVER! A CHRISTMAS CAROL SISTER ACT
 THE LITTLE MERMAID

_____ #ADULTS @ \$129.60
 _____ #SENIOR/STUDENT/MILITARY @ \$121.50
 _____ # CHILDREN (4-12) @ \$94.50

ADD THE FEZZIWIG BALL TO ANY ORDER ALL TICKETS FOR SEASON SUBSCRIBERS ARE \$35.00

_____ # of Adult Tickets X \$35.00 =
 Total Fezziwig Ball \$ _____ (Fill in #6 below)
 The Fezziwig Ball is not appropriate for children and youth

Purchase additional individual full price tickets with your subscription!

I would like to order additional **Individual Tickets** on the same night as my subscription for:

OLIVER! A CHRISTMAS CAROL SISTER ACT THE LITTLE MERMAID

_____ #ADULT TKTS @ \$48.00 _____ # SENIOR/STUDENT/MILITARY @ \$45.00 _____ # CHILDREN @ \$35.00

Individual Full Price Tickets Premiere Orchestra And Mezzanine Seating	
OLIVER	\$48
A CHRISTMAS CAROL	\$48
SISTER ACT	\$48
THE LITTLE MERMAID	\$48
THE FEZZIWIG BALL	\$45

1. Individual Ticket Total: \$ _____

2. Subscription Total: \$ _____

3. Subtotal: \$ _____

4. Sales Tax @ 8%: \$ _____

5. \$3.00/ticket Imperial Theatre Restoration Fee*: \$ _____

6. Total Fezziwig Ball: \$ _____

7. Tax Deductible Contribution... **THANK YOU!**: \$ _____

8. Grand Total Amount Enclosed: \$ _____

*Example: 2 Centerstage Season Tickets would equal a total of 8 tickets or \$24.00 Restoration Fee

OLIVER!

Friday 9/29/17 Saturday 9/30/17 Sunday 10/1/17

A CHRISTMAS CAROL, THE MUSICAL

Friday 12/8/17 Saturday 12/9/17 Sunday 12/10/17

SISTER ACT Friday 2/23/18 Saturday 2/24/18 Sunday 2/25/18

THE LITTLE MERMAID Friday 5/11/18 Sat. 5/12/18, matinee

Sat. 5/12/18 (evening) Sunday 5/13/18

**All Friday and Saturday shows are at 8:00 pm, Sundays are matinees at 3:00 pm and Saturday matinee at 2:00 pm

TITLE Mr. & Mrs. Dr. & Mrs. Dr. Mr. Mrs. Ms. Other _____

FULL NAME _____

STREET ADDRESS _____

CITY/STATE/ZIP _____

EMAIL _____ **PHONE** _____

Enclosed is my check (payable to The Augusta Players, Inc.)

Please charge my credit card # _____ Exp. _____ CVV _____

CARDHOLDER SIGNATURE _____

SELECT SEATING PREFERENCES

Center Orchestra Orchestra
 Right Orchestra left Center Mezzanine

ROW PREFERENCE (A=closest to stage;

B=center of theatre; C=farthest from stage)

Near aisle Center of row

1st Choice _____ 2nd Choice _____ 3rd Choice _____ (A, B OR C)

Seniors ages 65+ Students ages 13 to 23
**Mainstage theatre is not recommended for
 children under 4**

Mail completed form to: The Augusta Players,
 PO Box 2352, Augusta, GA 30903
 OR...Call to charge by phone 706-826-4707