HORIZON THEATRE COMPANY 2019 SUBSCRIPTION FORM

SUBSCRIBE TODAY! ONLINE: HORIZONTHEATRE.COM • **CALL:** 404.584.7450
EMAIL: BOXOFFICE@HORIZONTHEATRE.COM
MAIL: HORIZON THEATRE COMPANY PO BOX 5376 ATLANTA, GA 31107

Name _____

Address _____

City /State/Zip _____

Phone [h] _____ [w] _____ [c] _____

E-mail _____

Company I/we work for: [This helps us when we seek local funding.] _____

O I need SPECIAL SEATING [e.g. wheelchair or hearing impaired] _____

O I would like to receive tickets for the same dates as the following subscribers who ordered separately:

_____

PICK YOUR PACKAGE TYPE *(please check)*	4-Play	3-Play
O Flex Pass [Any Show]	$125	$100
O Opening Friday, 8 PM (Includes Receptions) [5/24, 7/12, 9/27]		$100
O Saturday, 8 PM	$125	$100
Weekend O Friday, 8 PM O Sunday, 5 PM O Saturday 3 PM	$100	$75
Weekday O Wednesday, 8 PM O Thursday, 8 PM	$90	$70
O Preview Thursday [5/16, 7/11, 9/19]		$50
Senior Weekend (65+)* O Friday O Saturday 3 PM O Sunday	$95	$70
Senior Weekday (65+)* O Wednesday O Thursday * Must Include proof of age.	$85	$65
Youth/Teen Flex Package (Full-time student under 25)** Good for any performance. * Must Include photo ID ** Must Include student ID for teen or photo and age of child.	$65	$50

PLEASE CHOOSE PRODUCTIONS FOR 3-PLAY PACKAGE AND WRITE IN ANY DATE REQUESTS

O *Pipeline*_____ O *The Cake*_____

O *Summer TBA* _____ O *The Curious Incident...* _____

I am enclosing payment for the following subscribers who do not reside with me:

_____

(Please attach names, addresses, and phone numbers separately.)

Tally Your Order

Regular Subscriptions _____ @ $_____ each = $ _____

Senior Subscriptions _____ @ $_____ each = $ _____

SUBTOTAL: $ _____

YES! I will be a Star Subscriber by making a tax-deductible contribution!

O $50 O $100 O $200 O $300 O $500 O $1000 O Other $ _____

TOTAL PAYMENT ENCLOSED: $ _____

PAYMENT OPTIONS

O Check enclosed [payable to Horizon Theatre Company] OR charge to: O Visa O MasterCard O AmEx O Discover

Card # _____ Exp Date _____

CVV# _____ Signature _____