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OTHER WAYS TO SUBSCRIBE — **ONLINE**: www.HorizonTheatre.com • **CALL**: 404.584.7450

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	DATE OF ORDER:				
Name					
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Phone [h]	[w]		[c]		
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Company I/we work for (this	helps us when we seek local funding):				
☐ I need special seating (e.g.	wheelchair or hearing impaired)				
☐ I would like to receive tickets for	the same dates as the following subscribers	s who ordered sep	oarately:		
			_		
CHOOSE YOUR	PACKAGE TYPE: (please chec	k)		5-PLAY	
☐ FLEX PASS [Any Performance]				\$165	
☐ PRESS OPENING FRIDAY [Includes Receptions]				\$160	
WEEKEND: ☐ Friday, 8pm ☐ Saturday, 3pm ☐ Saturday, 8pm ☐ Sunday, 5pm				\$160	
WEEKDAY:				\$130	
SENIOR WEEKEND (65+)*: ☐ Friday, 8pm ☐ Saturday, 3pm ☐ Saturday, 8pm				\$155	
SENIOR WEEKDAY (65+)*: Wednesday, 8pm Thursday, 8pm				\$125	
☐ PREVIEW THURSDAY, 8PM				\$80	
☐ STUDENT FLEX PACKAGE (Full-Time Student Under 25**) [Any Performance]				\$80	
*Must include proof of a	ge **Must include student ID for teen or	photo and age o	f child		
YOUR OPDED Youth	/YA Subscriptions	_ @ \$	each = each = each =	\$	
	[Must include to complete	_	ALES TAX [subtotal	1x.049] \$	
	by making a tax-deductible control \$300 \$500 \$1000			\$	\$
		TOTAL	PAYMENT ENCL	OSED: \$	5
AYMENT OPTIONS					
	Horizon Theatre Company) OR charge		☐ Mastercard	☐ AmEx	Disc
n Date CVV	Signature				