

**JOIN US!**

**SUBSCRIBE! CALL: 404.584.7450**

**EMAIL:** Boxoffice@HorizonTheatre.com • **MAIL:** P.O. Box 5376, Atlanta, GA 30117

DATE OF ORDER: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone [cell 1] \_\_\_\_\_ [cell 2] \_\_\_\_\_ [h] \_\_\_\_\_

Email(s) \_\_\_\_\_

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 who ordered separately: \_\_\_\_\_

**5-PLAY SUBSCRIPTIONS:** 4 Season Plays **PLUS** / Carry Your Heart • **4-PLAY SUBSCRIPTIONS:** 4 Season Plays **NO** / Carry Your Heart

CHOOSE YOUR PACKAGE TYPE: (please check)	5-PLAY	4-PLAY
<input type="checkbox"/> FLEX PASS [Any Performance]	\$180	\$148
<input type="checkbox"/> PRESS OPENING FRIDAY (2nd Friday of Run) [Includes Receptions]	\$175	\$144
WEEKEND: <input type="checkbox"/> Friday, 8pm <input type="checkbox"/> Saturday, 2pm <input type="checkbox"/> Saturday, 8pm <input type="checkbox"/> Sunday, 5pm	\$175	\$144
WEEKDAY: <input type="checkbox"/> Wednesday, 8pm <input type="checkbox"/> Thursday, 8pm	\$145	\$124
SENIOR WEEKEND (65+)*: <input type="checkbox"/> Friday, 8pm <input type="checkbox"/> Saturday, 2pm <input type="checkbox"/> Saturday, 8pm <input type="checkbox"/> Sunday, 5pm	\$170	\$140
SENIOR WEEKDAY (65+)*: <input type="checkbox"/> Wednesday, 8pm <input type="checkbox"/> Thursday, 8pm	\$140	\$120
<input type="checkbox"/> PREVIEW THURSDAY, 8PM (Day Before 1st Friday of Run)	\$95	\$76
<input type="checkbox"/> STUDENT FLEX PACKAGE (Full-Time Student Under 25**) [Any Performance]	\$95	\$76

\*Must include proof of age

\*\*Must include student ID for teen or photo and age of child

**PLEASE WRITE IN ANY DATE REQUESTS** We normally assign dates to subscribers, and then you have up till 24 hours prior to the performance to change those dates.

I Carry Your Heart with Me \_\_\_\_\_ Dog Mom \_\_\_\_\_ Hot Jambalaya \_\_\_\_\_

Holy Chicken Sandwich \_\_\_\_\_ Other Paths to God \_\_\_\_\_

<b>TALLY YOUR ORDER</b>	Regular Subscriptions _____ @ \$ _____ each = \$ _____
	Youth/YA Subscriptions _____ @ \$ _____ each = \$ _____
	Senior Subscriptions _____ @ \$ _____ each = \$ _____

[Must include to complete order] PLUS SALES TAX [subtotal x .049] \$ \_\_\_\_\_

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

☐ \$50 ☐ \$100 ☐ \$200 ☐ \$300 ☐ \$500 ☐ \$1000\* ☐ Other \$ \_\_\_\_\_

How I would like my name listed in the program: \_\_\_\_\_

\*Donors at the \$1000 dollar level enjoy VIP reserved seating at each performance & 2 complimentary Flex Passes.

**TOTAL PAYMENT ENCLOSED: \$ \_\_\_\_\_**

## PAYMENT OPTIONS

☐ Check enclosed (payable to Horizon Theatre Company) OR charge to ☐ VISA ☐ Mastercard ☐ AmEx ☐ Discover  
Card# \_\_\_\_\_

Exp Date \_\_\_\_\_ CVV \_\_\_\_\_ Signature \_\_\_\_\_

• HORIZON THEATRE RESERVES THE RIGHT TO SUBSTITUTE PLAYS, ARTISTS & DATES. TRANSACTIONS ARE NON-REFUNDABLE •

**OFFICE USE ONLY**

Patron Name \_\_\_\_\_

Received in Office: \_\_\_\_\_

Entered Date: \_\_\_\_\_

Entered by: \_\_\_\_\_

Order#: \_\_\_\_\_

Confirmation Sent Date \_\_\_\_\_

Patron #: \_\_\_\_\_