



ALBERTA THEATRE PROJECTS

SUBSCRIPTION ORDER FORM

1. Tell Us About Yourself

Name: _____

Address: _____

City: _____ P.C. _____

Email: _____

Day Phone: _____ Night Phone: _____

Please send me ATP's First-to-Know E-Newsletter

2. Select Your Package

9-play 6-play

If 6-Play, select which 2 shows in the Enbridge playRites Festival of New Canadian Plays you would like to attend:

- Thinking of Yu** by Carol Fréchette, translated by John Murrell
 Ash Rizin' by Michael P. Northey and Kyprios
 Drama by Karen Hines
 Good Fences by The Downstage Creation Ensemble

When would you like to attend?

- Fri.-Sat. Tue.-Thu. Pizza Night with Vee Preview
 Sat.-Sun. Matinée
 Wine Tasting Wednesday (add \$80 per order)

Where would you like to sit?

- Premiere Circle Zone A Zone B
 Give me the best available seating in my selected Zone
 Please contact me for seat selection

___ # of pkgs. X \$___ price per package = Sub Total \$___

Need to stay flexible? Contact the Ticket Office to find out about our 4-Flex Pass.

3. Please Add the Following to My Order

"The Wizard of Oz" Preferred date to attend _____

___ Adult Tickets X \$___ price per ticket

___ Senior / Student Tickets X \$___ price per ticket

= Sub Total \$___

Lawson Lundell Celebrity Hors D'Oeuvres (preceded by a performance of Ash Rizin' on Feb. 24th, 2012)

___ Tickets, to accompany my subscription performance of Ash Rizin' X \$30 = Sub Total \$___

___ Event Only Tickets X \$30 = Sub Total \$___

4. Tax Advantage

The price of a ticket covers only 34% of the cost associated with producing our season. We rely on your generosity to help us raise a portion of our \$2 million fundraising goal in order to advance our three pillars of programming: to produce a season of award-winning contemporary theatre, to celebrate creation and innovation through the Enbridge playRites Festival of New Canadian Plays and to support our LEGACY (Lifelong Education and Growth for Artists, Community and Youth) programs.

Yes. I/We wish to make a tax deductible donation of \$_____

I/We would like to be recognized in the playbill as: _____

I/We would like to remain anonymous.

5. Payment Options

The GRAND TOTAL of my order is: \$ _____

Please process my full payment today.

I would like to pay in 2 easy installments. Please process my first payment today and my final payment 4 weeks from today. (Final payments must be made on or prior to September 19th, 2011.)

Credit Card Information

Amex MasterCard Visa

Name on Card: _____

Credit Card #: _____

Expiry Date: _____

Signature: _____

Thank you for supporting Alberta Theatre Projects!

IF YOU HAVE ANY QUESTIONS ABOUT BUYING TICKETS, PLEASE CALL THE TICKET OFFICE AT 403-294-7402.

PRIVACY POLICY

Alberta theatre Projects respects your privacy. Any personal information you provide to us including and similar to your payment details, address, telephone number and email will not be released, sold, or rented to any outside entities or individuals. As part of the EPCOR CENTRE Tessitura Consortium, your primary contact information can be seen by Consortium members; however, you cannot be contacted without the express permission of Alberta Theatre Projects. The information we collect is used to send you information you have requested. It could also be used to notify you about updates to our website, or to contact you for marketing purposes. If you do not wish to receive information from us in the future, please call (403) 294-7475.