

OCALA CIVIC THEATRE 2019-2020 SUBSCRIBER ORDER FORM

Please complete this form and return with payment to: Ocala Civic Theatre, 4337 East Silver Springs Boulevard, Ocala, Florida 34470

Name _____

Donors, please print your name EXACTLY as you want it to appear in the program (Mr. & Mrs. Bob Smith, Bob & Carol Smith, etc.)

Address _____

City _____ State _____ Zip _____

Home Phone: _____ Other Phone: _____ Best time to call: _____

E-Mail Address (please print legibly): _____

FOR OFFICE USE ONLY

I would like to receive the Ocala Civic Theatre newsletter (it's FREE!) Mail E-mail No, thank you.

STEP 1 • SIGNATURE SERIES (5 SHOWS)

I am ordering _____ Signature Series season tickets at **\$115.00**: \$ _____

I am ordering _____ Junior (18 & under) Signature Series season tickets at **\$50.00**: \$ _____

STEP 2 • OVATION SERIES (3 SHOWS)

I am ordering _____ Ovation Series season tickets at **\$69.00**: \$ _____

STEP 3 • THREE-NIGHT FLEX PASS (3 SHOWS)

I am ordering _____ Three-Night Flex Pass season tickets at **\$75.00**: \$ _____

STEP 4 • SEASON TICKET DONATION

In addition to the purchase of my season tickets, I wish to support Ocala Civic Theatre with my tax-deductible* donation for the 2019-2020 Season as follows:

Donor Levels	Donor Benefits
Friend \$ 25.00*	Listing in Signature Series Playbill, Early Season Ticket Sales \$ _____
Sustainer \$ 50.00*	Benefits Listed Above Plus Preferred Seating \$ _____
VIP \$ 100.00*	All Benefits Listed Above Plus Rehearsal Pass \$ _____
Co-Star \$ 250.00*	All Benefits Listed Above Plus Complimentary Concessions \$ _____
Celebrity \$ 500.00*	All Benefits Listed Above Plus Invitation to Donor Celebration \$ _____
Benefactor** \$ 750.00*	All Benefits Listed Above Plus Concierge Service \$ _____
Producer** \$ 1,000.00*	All Benefits Listed Above Plus Private Backstage Tour and Listing on Donor Board in Lobby \$ _____
Executive Producer** \$ 2,500.00*	All Benefits Listed Above Plus Golden Ticket \$ _____

*Donations over the cost of a season ticket are tax-deductible within the limits allowed by law.
**Payment options are available for donations in the Benefactor category and above.

STEP 5 • PAYMENT INFORMATION

Signature Series Season Tickets – Five Shows (Step 1)

(*Matilda: The Musical, The Savannah Sipping Society, Always... Patsy Cline, Father of the Bride, and Brigadoon*) \$ _____

Ovation Series Season Tickets – Three Shows (Step 2)

(*Vanya and Sonia and Masha and Spike, Menopause: The Musical, and To Kill a Mockingbird*) \$ _____

Three-Night Flex Pass - Three Shows (Step 3)

(Call us starting July 29 to reserve any/all three shows of your choice.) \$ _____

Season Ticket Donation (Step 4)

..... (Thank You!) \$ _____

SUMMER SPECIAL

The Servant of Two Masters (July 26-28, 2019)

_____ tickets at \$16 each \$ _____

(Our box office will call you to assign the date and seats for *The Servant of Two Masters*)

TOTAL ENCLOSED \$ _____

PAYMENT OPTION

Benefactors and Above Only: I would like to arrange a payment schedule for the donation portion of the charge. Please contact me.

MATCHMAKER

I work for or am retired from a company which may match my donation. Please contact me.

METHOD OF PAYMENT

Check enclosed in the amount of \$ _____

Charge \$ _____ to my credit card.

Signature _____

CardNo. _____ Exp. _____ CVV _____

SIGNATURE SERIES

SIGNATURE SERIES RENEWAL INFORMATION

Renewal date for all current subscribers is June 7, 2019.

- Renew my Signature Series STANDING RESERVATION (same day/same seat, or as close as possible to my current seat).
- Renew my Signature Series FLEX PASS.
- Change from STANDING RESERVATION to FLEX PASS.
- Change from FLEX PASS to STANDING RESERVATION. (Describe change request below.)*
- Change my STANDING RESERVATION. (Describe change request below.)*

*Please select your performance day preferences (example: Any Friday, 2nd Thursday, 1st Saturday Matinee, etc.) from the Signature Series Standing Reservation Schedule.

1st Choice: _____ 2nd Choice: _____

Please indicate your general seating preference (example: Rows A-F, closer to aisle, etc.)

OVATION SERIES

OVATION SERIES RENEWAL INFORMATION

Renewal date for all current subscribers is June 7, 2019.

- Renew my Ovation Series STANDING RESERVATION (same day/same seat, or as close as possible to my current seat).
- Renew my Ovation Series FLEX PASS.
- Change from STANDING RESERVATION to FLEX PASS.
- Change from FLEX PASS to STANDING RESERVATION. (Describe change request below.)*
- Change my STANDING RESERVATION. (Describe change request below.)*

*Please select your performance day preferences - Option A, B, C, D, or E - from the Ovation Series Standing Reservation Schedule.

1st Choice: _____ 2nd Choice: _____

Please indicate your general seating preference (example: Rows A-F, closer to aisle, etc.).

Previously The Weeknight Wild Card
NOW CHOOSE ANY EVENING!

THREE-NIGHT FLEX PASS

To change to a different subscription package, please indicate your request below under the NEW SUBSCRIBER sections.

Renew

NEW SUBSCRIBER:

I prefer a Three-Night Flex Pass.

SIGNATURE SERIES NEW SUBSCRIBER

- I prefer a FLEX PASS (make my own reservations, show by show).
- I prefer a STANDING RESERVATION (same day/same seat for each show).

Please select your performance day preferences (example: Any Friday, 2nd Thursday, 1st Saturday Matinee, etc.) from the Signature Series Standing Reservation Schedule.

1st Choice: _____ 2nd Choice: _____

Please indicate your general seating preference (example: Rows A-F, close to aisle, etc.)

OVATION SERIES NEW SUBSCRIBER

- I prefer a FLEX PASS (make my own reservations, show by show).
- I prefer a STANDING RESERVATION (same day/same seat for each show).

Please select your performance day preferences - Option A, B, C, D, or E - from the Ovation Series Standing Reservation Schedule.

1st Choice: _____ 2nd Choice: _____

Please indicate your general seating preference (example: Rows A-F, close to aisle, etc.)

PLEASE NOTE: Seating preference is given to current subscribers, long-time subscribers, donors, and those who have contributed to the renovation project. Every effort will be made to place you in the section you request. If your choices are not available, you will be assigned the best available seats. If you would like to sit with friends, all reservation forms must be submitted together. **For additional information, please call 352-236-2274.**

A copy of the official registration and financial information may be obtained from the division of consumer services by calling toll-free 1-800-help-fla or online at www.Floridaconsumerhelp.Com. Registration does not imply endorsement, approval, or recommendation by the state. Registration #: CH 711426