

JUNEAU SYMPHONY SEASON TICKET ORDER FORM
2011-2012 SEASON

Name _____

Mailing Address _____

City, State, Zip _____

Phone _____

- Yes! Sign me up for the quarterly e-newsletter.
- Yes! I would like to hear about volunteer opportunities via email.

Email _____

*The Juneau Symphony will never share your email address with anyone.

Please select your tickets:		
Adult Premium Seats	\$95 x _____ =	\$ _____
Adult Regular Seats	\$85 x _____ =	\$ _____
Senior Premium Seats (age 65+)	\$78 x _____ =	\$ _____
Senior Regular Seats (age 65+)	\$68 x _____ =	\$ _____
Student/Youth (includes UAS)	\$78 x _____ =	\$ _____
Student/Youth (includes UAS)	\$44 x _____ =	\$ _____
	DONATION	\$ _____
	TOTAL	\$ _____

Please select your preferred day: **Saturday** or **Sunday**

Reserved Seats - All seats will be reserved this season.

- I would like the same seats as last year:
- I would like different seats, or I am reserving for the first time. Call me at the number below to discuss which seats would be best for me.

Day Phone _____

Payment Method (please circle one) **Check** **Credit Card**

Card Number _____ **Expiration Date** _____

CVC Number _____ **Name on Card** _____

Signature _____