

SEASON PERFORMANCES

#1. Friday at 7:00 pm
October 6, February 16, April 20

#2. Saturday at 1:30 pm
October 7, February 17, April 21

#3. Saturday at 5:00 pm
October 7, February 17, April 21

#4. Sunday at 1:30 pm
October 8, February 18, April 22

#5. Sunday at 5:00 pm
October 8, February 18, April 22

#6. Friday at 7:00 pm
October 13, February 23, April 27

#7. Saturday at 1:30 pm
October 14, February 24, April 28

#8. Saturday at 5:00 pm
October 14, February 24, April 28

#9. Sunday at 1:30 pm
October 15, February 25, April 29

#10. Sunday at 5:00 pm
October 15, February 25, April 29

A CHRISTMAS CAROL

- | | |
|-------------------------------|-------------------------------|
| #1. Friday, Dec. 1, 7 pm | #6. Friday, Dec. 8, 7 pm |
| #2. Saturday, Dec. 2, 1:30 pm | #7. Saturday, Dec. 9, 1:30 pm |
| #3. Saturday, Dec. 2, 5 pm | #8. Saturday, Dec. 9, 5 pm |
| #4. Sunday, Dec. 3, 1:30 pm | #9. Sunday, Dec. 10, 1:30 pm |
| #5. Sunday, Dec. 3, 5 pm | #10. Sunday, Dec. 10, 5 pm |

Be sure to list your performance choice if you order A Christmas Carol Tickets

Cut Here



S17: _____
Date Rcvd: _____ CC: _____

Office Use Only

2017 - 2018 TICKET ORDER FORM

Deadline to Renew - August 5th

Name: _____

Address: _____

City, State, Zip: _____

Phone: h _____ w _____ c _____

Email: _____

Does anyone in your household have military affiliation? *Check if applicable*

Active Duty Reserve Retired Government Contractor

Special Seating Needs: Wheelchair Hearing Vision

AGES OF CHILDREN: _____

1. I am Renewing, 2016-2017 Season subscriber
 Same seats as last year Better if available
 New Season ticket purchaser
 Ordering Christmas Carol (see #3a or #3b)

- 2a. I would like to attend the following performance for each play:
- | | | |
|---|---|--|
| <input type="checkbox"/> #1. Fri. 7:00 pm | <input type="checkbox"/> #4. Sun. 1:30 pm | <input type="checkbox"/> #7. Sat. 1:30 pm |
| <input type="checkbox"/> #2. Sat. 1:30 pm | <input type="checkbox"/> #5. Sun. 5:00 pm | <input type="checkbox"/> #8. Sat. 5:00 pm |
| <input type="checkbox"/> #3. Sat. 5:00 pm | <input type="checkbox"/> #6. Fri. 7:00 pm | <input type="checkbox"/> #9. Sun. 1:30 pm |
| | | <input type="checkbox"/> #10. Sun. 5:00 pm |

2b. I am ordering ___(no.) season tickets at \$39 ea. = _____

3a. I am ordering Christmas Carol tickets with my season subscription
 Christmas Carol # ___ Day: ___ Date: ___ Time: _____
 I am ordering ___(no.) adult Christmas Carol tickets at \$18 ea. = _____
 I am ordering ___(no.) Christmas Carol 17 & under at \$13 ea. = _____

3b. I am ordering Christmas Carol tickets ONLY
 Christmas Carol # ___ Day: ___ Date: ___ Time: _____
 I am ordering ___(no.) adult Christmas Carol tickets at \$20 ea. = _____
 I am ordering ___(no.) Christmas Carol 17 & under at \$15 ea. = _____

SUBTOTAL: _____

I wish to support Fantasy Playhouse Children's Theater & Academy with a donation* of \$ _____

*Name as you would like it to appear in the program

TOTAL ENCLOSED: _____

Visa/MC/Discover: _____ - _____ - _____ - _____ Exp. _____

Or make checks payable to Fantasy Playhouse CVV _____

Mail to: Fantasy Playhouse, 3312 Long Avenue, Huntsville, AL 35805