

# 2017-2018 Ticket Order Form


Reservations must be prepaid. Cash, check, VISA & MasterCard accepted.

**Mail:** PO Box 607, Bellingham WA 98227-0607  
**Phone:** (360) 733-1811  
**Office:** 1600 H St (Guild Playhouse)  
**Online:** BellinghamTheatreGuild.com

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Email \_\_\_\_\_


\* = Sunday 2 pm matinee. Other days, 7:30 pm curtain.

**The Mousetrap**  
 September 22, 23, 24\*; 28, 29, 30, Oct. 1\*; 5, 6, 7, 8\* Date: \_\_\_\_\_

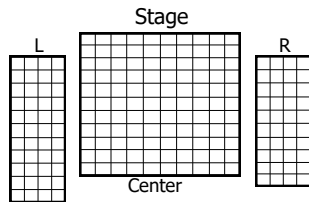
**The Christmas Schooner**   
 Nov 24, 25, 26\*; Nov. 30, Dec 1, 2, 3\*; 7, 8, 9, 10\* Date: \_\_\_\_\_

**My Three Angels**  
 Jan. 26, 27, 28\*; Feb 1, 2, 3, 4\*; 8, 9, 10, 11\* Date: \_\_\_\_\_

**Scapino!**  
 Mar 30, 31, Apr 1\*; 5, 6, 7, 8\*; 12, 13, 14, 15\* Date: \_\_\_\_\_

**A Funny Thing Happened on the Way to the Forum**   
 June 8, 9, 10\*; 14, 15, 16, 17\*; 21, 22, 23, 24\* Date: \_\_\_\_\_

- Contact me about wheelchair seating reservations.
- I wish to reserve dates now.  
*Indicate dates above and mark seating preference at right*
- I will reserve dates later.  
*Contact Ticket Office to choose your dates*



**TICKETS**  
 Indicate number of tickets of each type. St/Sr = students/seniors 62+.

**5-Show Season Tickets**  
 Adults \$65 x \_\_\_\_\_ + St/Sr \$55 x \_\_\_\_\_ + Child \$35 x \_\_\_\_\_ = \$ \_\_\_\_\_

**4-Show Season Tickets** (indicate 4 shows above)  
 Adults \$52 x \_\_\_\_\_ + St/Sr \$44 x \_\_\_\_\_ + Child \$28 x \_\_\_\_\_ = \$ \_\_\_\_\_

**Single Show Tickets** (Love, Loss and What I Wore is not part of season package.)  
 Adults \$14 x \_\_\_\_\_ + St/Sr \$12 x \_\_\_\_\_ + Child \$8 x \_\_\_\_\_ = \$ \_\_\_\_\_

**MEMBERSHIP/DONATIONS** *Guild Membership and recognition in show programs included with donations of \$25 individual / \$50 couple or more. All donations are tax deductible. Recognition categories are as follows: \$25 to 49 | \$50 to 99 | \$100 to 249 | \$250 to 499 | \$500 to 999 | \$1,000+ For donation of \$25 individual/\$50 couple or more, recognize me/us as:*

I wish to support live theatre through my donation of \$ \_\_\_\_\_

GRAND TOTAL TICKETS AND DONATIONS \$ \_\_\_\_\_

- MasterCard
- VISA
- Cash
- Check enclosed

Credit Card # \_\_\_\_\_

Expiration Date: Month \_\_\_\_\_ Year \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

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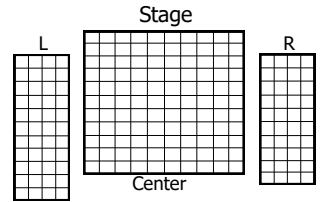
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