



2022-23 CLASSIC MEMBERSHIP FORM

#1. SELECT YOUR SEASON SHOWS

- Dance Nation
- In Every Generation
- A Nice Indian Boy
- Beauty and the Beast
- The World Goes 'Round
- Fela!
- Kinky Boots

TOTAL NUMBER OF SHOWS _____

#2. SELECT YOUR 2022-23 MEMBERSHIP PACKAGE (See chart below. Check your option. Circle your price.)

	7-show	6-show	5-show	3-show
PREVIEW PACKAGE: WEEK 1: <input type="checkbox"/> Wed. <input type="checkbox"/> Thurs. <input type="checkbox"/> Fri.	\$336.00	\$303.00	\$260.00	\$147.00
REGULAR PACKAGE: WEEKS 2 - 4: <input type="checkbox"/> Wed. Mat. <input type="checkbox"/> Wed. Eve. <input type="checkbox"/> Thurs. <input type="checkbox"/> Fri.	\$385.00	\$339.00	\$290.00	\$186.00
PRIMETIME PACKAGE: WEEKS 2 - 4: <input type="checkbox"/> Sat. Mat. <input type="checkbox"/> Sat. Eve. <input type="checkbox"/> Sun. Mat.	\$420.00	\$366.00	\$315.00	\$198.00

#3. ADD A CHRISTMAS CAROL

OUR HOLIDAY CLASSIC RETURNS

A Christmas Carol: A Ghost Story of Christmas # of tickets _____ \$20 each X _____ = \$ _____

#4. PLEASE MAKE A GIFT IN SUPPORT OF EXTRAORDINARY THEATER AND EDUCATION

(Gifts of \$250 or more will be recognized in our program)

- \$100
- \$300
- \$500
- \$1,000
- \$2,500
- Other _____

TURN OVER TO COMPLETE

#5. TOTAL YOUR ORDER

of Memberships _____ x \$ _____ = \$ _____
Subtotal from #3 (A Christmas Carol) = \$ _____
Gift (#4) = \$ _____
Handling Fee = \$ 10.00
Subtract Any Funds on Account = \$ _____

Total = \$ _____

#6. PAYMENT METHOD

Check (Make payable to Olney Theatre Center)

Credit Card (Fill out the section below)

Visa MC AmEx Discover

Name on Credit Card _____

Card # _____

Exp. Date ____/____ CVC _____

Signature _____

#7. SPECIAL NEEDS AND REQUIREMENTS

Use the space below to briefly describe any specific needs that you may have (e.g. handicapped seating, audio description, etc.).

TERMS AND CONDITIONS:

- All prices inclusive of a \$2.50/ticket Facility fee.
- Season tickets will be sent electronically.
- All sales final. **Unlimited exchanges, but no refunds.**
- All exchanges need to pay the difference when exchanging from a less expensive performance to a more expensive performance.

I acknowledge that I have read and understand the above terms and conditions.

PERSONAL INFORMATION CHANGES

If your address, email, or phone number has changed, please use the space below to update your information.

Olney Theatre Center is a nonprofit 501(c)3 organization as determined by the IRS. Your donation is tax-deductible as allowed by law.

CONTACT INFORMATION: Olney Theatre Center • 2001 Olney-Sandy Spring Road • Olney, MD 20832
OlneyTheatre.org • 301-924-3400

#8. MEMBER INFO

Name _____

Address _____

City _____ State _____ Zip _____

Day Phone (_____) _____ Evening Phone (_____) _____

Email _____

Member 1 _____ Birthday ____/____/____

Member 2 _____ Birthday ____/____/____

Member 3 _____ Birthday ____/____/____

Member 4 _____ Birthday ____/____/____