

First and Last Name _____

Address _____

City _____ State _____ Zip Code _____

Phone (day) _____ (evening) _____

Email _____ Add me to your email list

	WEEK			WEEK				
	FRI	SAT	SUN	WED	THU	FRI	SAT	SUN

MARQUEE SERIES	CIRCLE THE SHOW TIMES YOU WISH TO SEE BELOW							
A Streetcar Named Desire <i>Hansen Theatre</i>	9/25 7:30	9/26 7:30		9/30 7:30	10/1 7:30	10/2 7:30	10/3 7:30	10/4 2:30

BOX OFFICE USE ONLY								
Hedda Gabler <i>Hansen Theatre</i>	11/13 7:30	11/14 7:30		11/18 7:30	11/19 7:30	11/20 7:30	11/21 2:30	11/22 7:30

BOX OFFICE USE ONLY								
Hamlet <i>Hansen Theatre</i>	2/19 7:30	2/20 7:30		2/24 7:30	2/25 7:30	2/26 7:30	2/27 2:30	2/28 7:30

BOX OFFICE USE ONLY								
Scapino! <i>Hansen Theatre</i>	4/16 7:30	4/17 2:30 7:30	4/18 2:30	4/21 7:30	4/22 7:30	4/23 7:30	4/24 2:30	

BOX OFFICE USE ONLY								
	THU	FRI	SAT	SUN	THU	FRI	SAT	SUN
HORIZON SERIES	CIRCLE THE SHOW TIMES YOU WISH TO SEE BELOW							
Almost, Maine <i>Mallett Theatre</i>	10/22 7:30	10/23 7:30	10/24 7:30	10/25 2:30	10/29 7:30	10/30 7:30	10/31 2:30 7:30	11/1 2:30

BOX OFFICE USE ONLY								
Top Girls <i>Mallett Theatre</i>	3/25 7:30	3/26 7:30	3/27 7:30	3/28 2:30	4/1 7:30	4/2 7:30	4/3 2:30	4/4 7:30

BOX OFFICE USE ONLY		
Acct.# _____	Date Rec'd _____	
Buy _____	Pay _____	Marketing _____

SHOW SELECTION

Select your choice of performance dates by circling the specific desired play times.

Write the number of tickets needed on the reverse side of this form. Evening curtain times are 7:30 p.m.; matinees are at 2:30 p.m. All sales final, no refunds. PLEASE NOTE MATINEE TIME CHANGE TO 2:30 p.m.

Flex Pass purchasers choose two Marquee shows in combination with one Horizon Series production.

Subscription Order Form

SEASON SUBSCRIPTIONS

CALCULATE SUB-TOTALS

All Access Season Subscription See all Marquee Series shows and Horizon Series shows for one low price!

General Public: ____x\$75 + Student: ____x\$50 + Senior (62+): ____x\$63 = \$ _____

Marquee Subscription See all Marquee Series shows: *Streetcar, Hedda Gabler, Hamlet, Scapino!*

General Public: ____x\$62 + Student: ____x\$40 + Senior (62+): ____x\$49 = \$ _____

Flex Pass Subscription See two Marquee Series shows, and one Horizon Series show.

Pick TWO (Indicate # of tickets): **Streetcar:** ____ **Hedda Gabler:** ____ **Hamlet:** ____ **Scapino!:** ____ = \$ _____

AND Pick ONE (Indicate # of tickets): **Almost, Maine:** ____ **Top Girls:** ____

General Public: ____x\$42 + Student: ____x\$27 + Senior (62+): ____x\$34 = \$ _____

SINGLE TICKETS: To Calculate price, indicate # of tickets:

Streetcar: Gen. Public: ____x\$19 + Students: ____x\$12 + Seniors(62+): ____x\$15 = \$ _____

Hedda Gabler: Gen. Public: ____x\$19 + Students: ____x\$12 + Seniors(62+): ____x\$15 = \$ _____

Hamlet: Gen. Public: ____x\$19 + Students: ____x\$12 + Seniors(62+): ____x\$15 = \$ _____

Scapino!: Gen. Public: ____x\$19 + Students: ____x\$12 + Seniors(62+): ____x\$15 = \$ _____

Almost, Maine: Gen. Public: ____x\$13 + Students: ____x\$9.50 + Seniors(62+): ____x\$12 = \$ _____

Top Girls: Gen. Public: ____x\$13 + Students: ____x\$9.50 + Seniors(62+): ____x\$12 = \$ _____

Ticket income covers less than half the cost of Purdue Theatre productions. Please consider making a tax-deductible contribution with your order. If paying by check, your Theatre Guild gift requires a separate check made payable to **Purdue Foundation**. If paying by credit card, simply add your Guild gift to the ticket order total.

MY CONTRIBUTION TO THE PURDUE THEATRE GUILD: \$ _____

Please list the donor names in playbills as:

9793

TOTAL COST FOR PURDUE THEATRE TICKETS

(Check made payable to PURDUE UNIVERSITY): \$ _____

TOTAL CONTRIBUTED TO PURDUE THEATRE GUILD

(Check made payable to PURDUE FOUNDATION): \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____

Prices include box office fees

DID YOU REMEMBER TO SELECT YOUR CHOICE OF PERFORMANCE DATES ON THE REVERSE SIDE OF THIS FORM? We cannot complete your order without your selections

PAYMENT METHOD (check box): MasterCard Visa Discover

PHONE ORDERS, call 765-494-3933 or 1-800-914-SHOW. All ticket prices include a box office service fee.

ACCOUNT # _____	EXPIRATION DATE _____
PRINT NAME _____	AUTHORIZED SIGNATURE _____
CHECK # (Payable to PURDUE UNIVERSITY for ticket orders) _____	CHECK # (Payable to PURDUE FOUNDATION for Theatre Guild gifts) _____