

Bay Area Cabaret '11-'12 Subscription Order Form

Subscribers receive a substantial ticket discount, seats in our subscriber section, no service charge and ticket exchange among series performances.

To subscribe: 1) fax this form to (415) 945-0299, 2) mail it to: 21 Ward St. #5, Larkspur CA 94939 or 3) call us at (415) 927-INFO(4636).

I would like to order:

___ (no. of subscriptions) x \$250 (includes six shows: 9/16 Salonga, 10/22 Gallagher, 12/11 Kent, 1/15 Ebersole, 2/26/Pizzarelli, 5/12 Benanti)

Total subscription amount due: _____

Name: _____

Home Phone: _____ **Work Phone:** _____

Address: _____

City/State: _____ **Zip:** _____

Email address: _____

Payment method

___ Enclosed is a check payable to Bay Area Cabaret (preferred) (or)

___ Please charge my VISA/MC # _____

Name on card: _____ **Security code:** _____

Expiration date: _____ **Signature:** _____

Donor Benefits:

Ticket sales cover less than half our costs. We are grateful for donations of any size, which are tax deductible to the extent permitted by law. Each level below includes benefits of the previous level.

- Friend (\$100-\$249): program acknowledgment
- CabarAngel (\$250-\$499): reserved seating in subscriber section and 2 complimentary cocktails at a show
- VIP Circle (\$500-\$999): reserved *premium* table seating and 2 complimentary cocktails at *each* show
- Mr./Ms. Producer (\$1,000+): "In association with" producing credit in event programs and an invitation to lunch or dinner with a season artist

I'd like to make a tax-deductible donation to Bay Area Cabaret in the amount of _____.

___ Enclosed is a check payable to Bay Area Cabaret (or)

___ Please charge the above credit card.

Single tickets to all shows are available at City Box Office (415) 392-4400 or online at www.bayareacabaret.org.