

2017 SUBSCRIPTION FORM

1. Your Details - please print clearly

First name _____ Family name _____
 Address (tickets will be mailed here) _____
 _____ Postcode _____
 Phone _____ Mobile _____
 Email _____

2. Number of Subscriptions

ALL 6 SHOWS

Qty	Type	Cost	Total
	Full	@ \$138	\$
	Conc	@ \$108	\$
TOTAL			\$

ANY 5 SHOWS

Qty	Type	Cost	Total
	Full	@ \$125	\$
	Conc	@ \$100	\$
TOTAL			\$

Your student / concession /
 pension card no. (please circle one):

IF YOU ARE CHOOSING A FIVE SHOW PACKAGE, GO TO STEP 4.

3. Performance Dates/Seating - 6 Show Packages Only

**See EVERY production and let us work out the dates.
 PLEASE TICK ONE BOX ONLY. I would like tickets to:**

- every opening night of all 6 shows **P1**
- every closing night of all 6 shows **P2**
- the second Friday of all 6 shows **P3**
- the third Friday of all 6 shows **P4**
- the first Saturday of all 6 shows **P5**
- the second Saturday of all 6 shows **P6**
- the third Saturday of all 6 shows **P7**
- the first Sunday of all 6 shows **P8**
- the second Sunday of all 6 shows **P9**
- the last Sunday of all 6 shows **P10**
- the first Wednesday of all 6 shows **P11**
- the second Wednesday of all 6 shows **P12**
- the last Wednesday of all 6 shows **P13**

If you have chosen one of these packages, please go to Step 5.

If these packages don't suit you, please go to Step 4 and create your own season.

4. Create Your Own Season and Choose Your Dates

Play	1st Choice Date	2nd Choice Date
Calendar Girls		
The Book of Everything		
Perfect Wedding		
The Women of Lockerbie		
Ladies in Lavender		
Wanted - One Body!		

>>>>> PLEASE COMPLETE SECOND PAGE >>>>>

5. Choose Your Seats

Preferred seating.
Every effort will be made to assign your preferred seats, but **NO GUARANTEE IS GIVEN.**

Row	Seat

F9 and F10 are wheelchair access seats. You are not able to request them unless wheelchair access is required.

Would you like use of the foyer/kitchen for supper?

Is wheelchair access required?

6. Total Ticket Cost

TOTAL TICKET COST

from step 2
(no booking fee payable)

\$ _____

PLEASE TICK HERE

I understand that ticket exchanges can only be made by telephone on 9634 2929 at a cost of \$4.35 (incl. gst) per transaction (fee may change at discretion of ticketing agency). You cannot exchange tickets at the theatre's box office. **Your first exchange for each play is FREE but you will be charged for any subsequent changes.**

7. How to Pay

Cheque

Make payable to Castle Hill Players Inc

Money Order

Credit Card

Please complete authority below

Visa

Mastercard

Name on card _____

Card number _____ / _____ / _____

Expiry Date _____

Validation/Security No. _____
(last 3 digits on back of card)

Authorising Signature _____



Mail this form to our ticketing agency,
TAZ Entertainment at:
PO Box 4072, Swan View WA 6056

THE PAVILION THEATRE
WWW.PAVILIONTHEATRE.ORG.AU

**HOME OF THE
CASTLE HILL
PLAYERS**