

Yes, I would like to order Season Tickets for the 2017-2018 Season

* Please note that season tickets are to be picked up at the box office the night of the performance. We no longer send them out ahead of time. You may present this letter at the box office with your check if you do not wish to mail it in ahead of time.

"The Rocky Horror Show" (Musical/Comedy, not intended for children)

Oct 6th 8PM Oct 7th 7:30PM Oct 7th 11:59PM*

Oct 13th 8pm Oct 14th 7:30PM Oct 14th 11:59PM

(* note special midnight performances, no matinee for this production)

"Our Town" (Drama)

Jan 12th 8PM Jan 13th 8PM Jan 14th 2:30PM

Jan 19th 8PM Jan 20th 8PM

"Something's Under the Bed" (Children's musical)

March 23rd 8PM March 24th 8PM March 25th 2:30PM

March 30th 8PM March 31st 8PM April 1st 2:30PM

"The Foreigner" (Comedy)

May 25th 8PM May 26th 8PM May 27th 2:30PM

June 1st 8PM June 2nd 8PM

Please write the number of tickets beside each date. Season tickets are \$35, individual adult tickets are \$9 if ordered on this form, and child tickets are \$5. You do not have to purchase tickets for every show to enjoy the discounted price; choose the productions that interest you!

season tickets ___ X \$35 = _____

extra adults ___ X \$9 = _____

extra children ___ X \$5 = _____

Name: _____
Phone: _____
Address: _____
Seating preference: _____
Email: _____

Yes, I would like to become a patron of Roundtown Players

_____ I want to be a 50 for 50 sponsor (\$50 of generosity)

_____ Other amount of generosity

All patrons will be listed in our programs. Our 50 for 50 patrons have the option of being listed as a sponsor for individual shows.

Listed name to be recognized in every program

If you wish to be listed as a 50 for 50 sponsor for an individual show, please indicate which production you would like recognition for.

Yes, I would like to support the scholarship fund

_____ amount enclosed

Donations to our scholarship fund will be recognized in our programs.
Listed name for programs.

Ticket Purchases \$ _____
Patron Donation \$ _____
Scholarship Donation \$ _____

Total enclosed \$ _____

Please mail this form to:
Roundtown Players
P O Box 431
Circleville, OH 43113

Any questions concerning this form may be directed to Tahrea Maynard, President of the Board of Directors. Her email is rtpgurl87@gmail.com.

Roundtown Players of Pickaway County, Inc. is a chartered 501(c)(3) organization. Please consult your tax adviser for deductibility questions.