

2015-2016 Season Subscription Order Form

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

☐ I am a current subscriber (2014-15)

____ I would like the same seats

____ I would like different seats, if available, in:

☐ front ☐ middle ☐ back ☐ aisle

☐ I am a new subscriber

My seat preference is: ☐ best available

☐ front ☐ middle ☐ back ☐ aisle

New subscriber seating requests will be accommodated when possible, or best available seating will be assigned.

Select Your Season Package

☐ **Full Season CPAS Package:** Includes all 8 Campus Performing Arts Series (CPAS) performances.

#_____ adult subscription @ \$225 each (Total _____)

#_____ youth subscription @ \$175 each (Total _____)

☐ **Half Season CPAS Package:** Select 4 performances from the Campus Performing Arts Series in the box to the right.

#_____ adult subscription @ \$125 each (Total _____)

#_____ youth subscription @ \$100 each (Total _____)

☐ **Variety Package** Select 6 performances of your choice from both series listed in the box to the right.

#_____ adult subscription @ \$180 each (Total _____)

#_____ youth subscription @ \$140 each (Total _____)

SEASON PACKAGE TOTAL: \$_____

All Season Packages above include a **Ticket Exchange Option** for any show listed here; see details listed to the right..
(No refunds. Tax credits available for returned tickets.)

Campus Performing Arts Series (CPAS)

- ☐ The Hit Men
- ☐ Classic Albums Live: Pink Floyd
Dark Side of the Moon
- ☐ Arianna String Quartet
- ☐ The Ultimate Christmas Show
- ☐ Ragtime the Musical
- ☐ Romeo and Juliet
- ☐ Count Basie Orchestra
- ☐ River North Dance Chicago

Leach Special Performance Series

- ☐ Borders of the Mind
- ☐ Adam Trent
- ☐ Ryan & Ryan

Any new events added to these two series throughout the year will be included in the Ticket Exchange Option.

Advance Single Tickets: Purchase of any of the above packages entitles you to advance ticket purchase for additional performances (regular single ticket sales begin 8/24/15). List any shows you would like to purchase in advance below:

1. Name of performance: _____

Adult ticket(s): _____ @ \$_____ each (Total _____) *[see prices inside brochure]*

Youth ticket(s): _____ @ \$_____ each (Total _____)

2. Name of performance: _____

Adult ticket(s): _____ @ \$_____ each (Total _____) *[see prices inside brochure]*

Youth ticket(s): _____ @ \$_____ each (Total _____)

ADVANCE TICKET TOTAL: \$_____

GRAND TOTAL: \$_____

Payment Options

- ☐ **CHECK** I have enclosed a check for the full amount payable to: **Missouri S&T**
- ☐ **CREDIT CARD** Please charge my credit card for the full amount.
- ☐ **PAYMENT PLAN*** Please charge my credit card on the monthly payment plan.
(See details listed to the right regarding payment plan amounts with service fees.)

Enter card information below:

☐ MasterCard Card Number: _____
☐ Visa
☐ Discover Expiration Date: _____ Billing Zip Code: _____
☐ Am. Express

Please mail completed form to:
Leach Theatre / 103 Castleman Hall / Rolla, MO 65409

Current subscribers must renew no later than June 30, 2015 to ensure same seating.
Season ticket sales conclude August 31, 2015.

After June 30, subscribers will be assigned the best available seats. No refunds. Tax credits available for returns.

**For questions regarding the easy payment plan, please contact Siiri Gilness in the Leach Box Office at 573-341-6964.*