

MEMBERS BOOKING FORM

CANBERRA

1. YOUR DETAILS

Title First Name Surname

Address

Suburb State Postcode

Phone Email

I would like to receive emails from Bell Shakespeare with news, special offers and production information.

2. SECOND MEMBER DETAILS / GIFT MEMBERSHIP RECIPIENT

These details are: Second Member Details Gift Recipient Details

Title First Name Surname

Address

Suburb State Postcode

Phone Email

I would like to receive emails from Bell Shakespeare with news, special offers and production information.

3. TICKET BOOKING – PLEASE CIRCLE YOUR PREFERRED PERFORMANCES

CANBERRA THEATRE CENTRE

ANTONY AND CLEOPATRA

APRIL 2018

Tues 6.30pm	Wed 6.30pm	Thu 7.30pm	Fri 7.30pm	Sat 2pm	Sat 7.30pm	Sun 4pm
				14	14	15
17	18	19	20	21	21	

JULIUS CAESAR

OCTOBER 2018

Tues 6.30pm	Wed 6.30pm	Thu 7.30pm	Fri 7.30pm	Sat 2pm	Sat 7.30pm	Sun 4pm
				13	13	14
16	17	18	19	20	20	

SEATING REQUIREMENTS OR PREFERENCES

4. MEMBERSHIPS (Do not include this fee if you already have a current membership.)

SUBTOTAL

Annual Membership	x \$60*	\$
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5. MEMBERS PRICE TICKETS (Max 4 per Production.)

PLEASE NOTE: Under 30 prices available for Sunday – Wednesday performances only. Under 18 prices available for all performances. Proof of age must be received for all Under 18 and Under 30 ticket holders.

TICKET TYPE	FULL	CONCESSION	UNDER 18	UNDER 30	SUBTOTAL
Antony and Cleopatra Premium	x \$74	x \$62	x \$45	x \$45	\$
Antony and Cleopatra A Reserve	x \$60	x \$51	x \$40	x \$40	\$
Julius Caesar Premium	x \$74	x \$62	x \$45	x \$45	\$
Julius Caesar A Reserve	x \$60	x \$51	x \$40	x \$40	\$

6. CALCULATE YOUR MEMBERSHIP AND TICKET TOTAL

TOTAL

Add together the values in the SUBTOTAL columns of section 4 and 5	\$
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7. MAKE A DONATION (All Donations over \$2 are tax-deductible.)

I would like to contribute towards the work of Bell Shakespeare by making a donation of:

SUBTOTAL

<input type="radio"/> \$25 <input type="radio"/> \$50 <input type="radio"/> \$100 <input type="radio"/> \$250 <input type="radio"/> Other (please write in the SUBTOTAL column to the right)	\$
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My preference is to support:

SUPPORTING CAST: Annual Giving programme **CREATIVE PATHWAYS:** Professional development opportunities

INFINITE SPACE: Building Bell Shakespeare's future **SHARING SHAKESPEARE:** Shakespeare for everyone, everywhere

Please acknowledge my donation as: _____

I would like my donation to remain anonymous.

Please send me details on making a lasting gift through **Planned Giving**.

8. CALCULATE YOUR GRAND TOTAL

GRAND TOTAL

Add together the values in the SUBTOTAL columns of section 6 and 7	\$
Processing and Postage Fee of \$6.60 . Fee only applies to orders including Member Tickets	\$ 6.60*
GRAND TOTAL	\$

9. YOUR PAYMENT DETAILS

Enclosed is a cheque payable to The Bell Shakespeare Company.

Please debit my card: VISA MasterCard Amex Diners

Card Number _____ Expiry Date _____ / _____ CVC _____

Signature _____

10. DELIVERY METHOD

Mail to me Hold at venue for collection

*Includes GST.

11. SUBMIT YOUR FORM

Send this form, along with proof of age or concession if required, to:

Post

Box Office
Reply Paid 10
Millers Point
NSW 2000

Email

boxoffice@bellshakespeare.com.au
(for submission of scanned forms)