

2008-9 TICKETS ORDER FORM

1. WHEN, SELECT PERFORMANCE DATE DESIRED:

A GLIMPSE OF THE LIGHT (please circle desired date):

Nov. 12 th - 1 pm*	Nov. 12 th -8pm	Nov. 13 th - 8pm	Nov. 15 th - 8pm	Nov. 16 th - 2 pm
		Nov. 20 th -8 pm	Nov. 22 nd - 8pm	Nov. 23 rd - 2pm

THE DYBBUK (please circle desired date):

Feb. 25 th - 1 pm*	Feb. 25 th -8pm	Feb. 26 th - 8pm	Feb 28 th - 8:30pm	March 1 st - 2 pm
		March 5 th -8 pm	March 7 th - 8:30pm	March 8 th - 2pm

* (P) = Preview

2. PLEASE SEND ME:

Mid-week or matinee **Adult** tickets @ \$29 or **Premium** @ \$34...** \$ _____
 Mid-week or matinee **Sen/Stu** Tickets @ \$24 or **Premium** @ \$34...** \$ _____
 Saturday Adult tickets @ \$33 or **Premium** @ \$44.....** \$ _____
 Saturday Sen/Stu tickets @ \$28 or **Premium** @ \$44.....** \$ _____

***Premium tickets are first 5 rows in the centre.*

3. BECOME A TEATRON SUPPORTER!

All donations are tax deductible

Patron (\$1,000 +) \$ _____
 Benefactor (\$500 - \$999) \$ _____
 Friend (\$100 - \$499) \$ _____
 Member (\$36) \$ _____

Total payment \$

Name: _____

Street: _____

City: _____

Province: _____ **Postal Code** _____

Phone: _____ - _____ - _____

E-mail _____

I wish my donation to be recognized under the following name:

Method of Payment:

Cheque (Payable to TEATRON) VISA MasterCard

Card Number: _____ - _____ - _____ - _____

Expiry date: _____ / _____

Signature _____