

THE BARD AND THE BAND!

2011-2012 Concert Season

TICKET ORDER FORM

All subscription packages may be ordered by:
 MAIL: Complete and return to PO Box 141446, Irving, TX 75014.
 PHONE: Call the office at 972.252.4800.
 FAX: Fax your completed order form to 972.252.4877.
 Or you may stop by the Las Colinas Symphony Orchestra office
 4322 N. Beltline Rd., Irving, TX 75038

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

Please Select One:

- Please mail my ticket(s) to the above address
 - I will pick my ticket up at Will Call via the above name
 - I wish to pick up my tickets from the office
- *Tickets ordered the week of a concert must be picked up at Will Call.

Choose a payment option:

- Check is enclosed made payable to the Las Colinas Symphony Orchestra (mail only)
 - AMEX Discover MasterCard Visa
- Card Number: _____ Exp: _____
 Name on Card: _____
 Signature: _____

	<u>BOX</u>	<u>A</u>	<u>B</u>	<u>C</u>	<u>Quantity</u>	<u>Section</u>	<u>Total</u>
Single Ticket	\$45.00	35.00	25.00	15.00	x _____	x _____	= \$_____

Date of Concert: _____

<u>Concert I</u>	<u>Concert II</u>	<u>Concert III</u>	<u>Concert IV</u>
October 22, 2011	November 19, 2011	December 17, 2011	January 21, 2012
<u>Concert V</u>	<u>Concert VI</u>	<u>Concert VII</u>	<u>Concert VIII</u>
February 18, 2012	March 17, 2012	April 21, 2012	May 12, 2012

*The seating charts can be found online at www.LasColinasSymphony.org

How did you hear about us?

FOR LCSD OFFICE USE ONLY

Seats Assigned _____ DB _____ PYMT _____ CHT _____ CONF _____ Donation _____ TCKT(s) Mailed _____ Filled By _____



Did You Know?

Income generated through ticket sales provides only **37%** of the cost of presenting the Las Colinas Symphony Orchestra Subscription Season. Therefore, we need additional support. **Won't you please consider an additional tax-deductible donation to our Annual Fund?**

***Contributions of \$100 or more are recognized in each concert program.**
Please be sure to list your name as you would like it to appear in the program.

I wish to add a tax-deductible contribution to the Las Colinas Symphony Orchestra in the amount of: \$ _____

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

LCSO does not share personal information.

Choose a payment option:

Check is enclosed made payable to the Las Colinas Symphony Orchestra

AMEX Discover MasterCard Visa

Card Number: _____ Exp: _____

Name on Card: _____

Signature: _____

Please complete form, include payment or credit card information, and mail to:

Las Colinas Symphony Orchestra
PO Box 141446
Irving, TX 75014

Please call 972.252.4800 with any questions.

*Donations may also be faxed with credit card payment to
972.252.4877*

Info@LasColinasSymphony.org

FOR LCSO OFFICE USE ONLY

Check# _____ Date Paid _____ Amount _____ Patron ID # _____

The
2011-
2012
Season

LAS COLINAS SYMPHONY ORCHESTRA
Robert Carter Austin, conductor