



SEASON TICKET ORDER FORM

Subscription Rates

Regular \$141 _____

Senior/Student \$124 _____

Balcony \$99 _____

Please indicate number of subscriptions.

Name _____

Address _____

Phone _____

Email _____

Holiday Spectacular *(Select one)*

December 12 show time: 7:30 p.m. [☐]

December 13 show time: 3 p.m. [☐] OR 7:30 p.m. [☐]

Carousel, In Concert *(Select one)*

show time: 2 p.m. [☐] OR 7:30 p.m. [☐]

[☐] I would like to keep my seats from last year.

[☐] I would like to change my seats. Please provide a brief description: _____

Season Subscription Total: \$ _____

Tax-Deductible Donation (optional): \$ _____

Total Amount To Be Charged: \$ _____

Any donation of \$100 or more entitles you to additional benefits including extra concert tickets and special event invitations. Please check our website for details.

Credit card information:

Please note that your credit card will be charged by our ticket vendor, Arts People.

I authorize my credit card to be charged by Arts People.

Number _____

Expiration date _____ CVV/CVC code _____

or

Check enclosed [☐]

Please mail this form with payment to:
Hershey Symphony • P.O. Box 93 • Hershey PA 17033