

# Soarin' 'Round the World THEATRE GUILD

## Season Passport Order Form

### SEATING CHART

STAGE												
Rows A-D are on the floor level. This section is handicap accessible.												
A	1	2	3	4	5	6	7	8	9	10	11	A
B	1	2	3	4	5	6	7	8	9	10	11	B
C	1	2	3	4	5	6	7	8	9	10	11	C
D	1	2	3	4	5	6	7	8	9	10	11	D
Rows E-G are one level up (two steps/Railing in front of Row E)												
E	1	2	3	4	5	6	7	8	9	10	11	E
F	1	2	3	4	5	6	7	8	9	10	XXXX	F
G	1	2	3	4	5	6	7	8	9	10	11	G
Rows H & I are one level up from previous level (two steps/Railing in front of Row H)												
H	1	2	3	4	5	6	7	8	9	10	11	H
I	1	2	3	4	5	6	7	8	9	10	11	I

Item	Quantity	Total
Regular Season Passport	_____ @\$95.00	
Senior Citizen (62+), Military, Student Season Passport	_____ @\$85.00	
KCTG Member Season Passport	_____ @\$80.00	
Child Season Passport (Ages 5-12; children under 5 not admitted)	_____ @\$45.00	
Donation (goes directly to our capital improvement fund)	XXXXXXXXXXXXXXXX	
Membership	_____ @\$15.00	
Toney Rocks Concert (Add on)	_____ @\$15.00	
Total Amount Enclosed	XXXXXXXXXXXXXXXX	

### CHOOSE YOUR SEATS

1st Choice: Row \_\_\_\_\_, Seat(s) \_\_\_\_\_

2nd Choice: Row \_\_\_\_\_, Seat(s) \_\_\_\_\_

### CHOOSE YOUR DATES

#### Performance Choice

- 1st Friday    1st Saturday  
 Sunday Matinee (1st Weekend)  
 2nd Friday    2nd Saturday

For credit card orders, please include:

Full Name on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

CVC (three digit number on back of card): \_\_\_\_\_

Zip Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Please return this completed form, along with your payment and any other forms to:

Kent County Theatre Guild

PO Box 783

Dover, Delaware 19901

SEATING IS ASSIGNED ON A FIRST COME, FIRST SERVED BASIS.

Please mail my passport(s) to:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number: \_\_\_\_\_

**DEADLINE FOR SEASON PASSPORTS IS DECEMBER 31, 2017.**