



AURORA PLAYERS, INC. - ORDER FORM
Memberships - Season Tickets - Gifts

To Order, Please return this entire sheet to:
Aurora Players, Membership/Ticket chair, P O Box 206, East Aurora, NY 14052.

For Information or Reservations, please call 716-687-6727

MEMBER or BUYER _____
(Important! Patrons, please print name exactly as you'd like it in the program)

Address _____ City _____

State _____ Zip _____ Phone (_____) _____

Email address if you want to include: _____

ANNUAL MEMBERSHIP (does not include Ticket Package) -- - - - - \$ _____

____ \$ 8 Student Membership (18 and younger)

____ \$10 Single Membership

____ \$15 Couple/Family Membership

PATRON MEMBERSHIPS (includes Ticket Package) -- - - - - \$ _____

____ \$ 85 Patron Membership

____ \$ 160 Sustaining Patron Membership

____ \$ 300 Friend Membership

____ \$ 500 Supporting Friend Membership

____ \$1000 Leading Friend Membership

SEASON TICKET PACKAGES (no Membership benefits) - - - - - \$ _____

____ \$ 34 Single Ticket Package (4 total tickets)

____ \$ 64 Double Ticket Package (8 total tickets)

GIFTING OPPORTUNITIES ***

____ Gift Certificate(s) at \$10 each x _____ - - - - - \$ _____
(Available in any quantity) (How many)

____ Single Season Ticket Package - - - - - \$ _____

____ Double Season Ticket Package - - - - - \$ _____

____ Patron Membership Package - (Level) _____ -- \$ _____

____ Annual Membership Only (Circle Selection)
Student Single Couple/Family - - - - - \$ _____

TOTAL \$ ENCLOSED: (Payable to Aurora Players) -- \$ _____

*** IF GIFTING, PLEASE MAIL GIFT FOLIO AND SELECTION to (check one):

____ BUYER (Above) OR ____ GIFT RECIPIENT (Below)

Gift Recipient Name _____

(Address needed for mailing of tickets & announcements prior to upcoming shows during the season)

Address _____ City _____

State _____ Zip _____ Phone (_____) _____

(For additional gift recipients, use back of this form or feel free to photo copy)

rev. 2-20-09

AURORA PLAYERS