

BARDAVON AND ULSTER PERFORMING ARTS CENTER

(DO NOT USE FOR DAYTIME PERFORMANCE SERIES)

MAIL ORDER FORM

EVENT	DATE/TIME	BALCONY	ORCHESTRA	# SEATS X PRICE	TOTAL
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$
				X \$	=\$

SUBTOTAL \$

*MEMBERSHIP DONATION \$

HANDLING FEE \$3.00

**FACILITY CHARGE \$

TOTAL \$

If order cannot be filled as requested,

- send best available
- next lower price
- any price
- cancel order

Name: _____ Eve Phone: () _____

Address: _____ Day Phone: () _____

City: _____ State: _____ Zip: _____

Email: _____

Member Account Number: _____

- Enclosed is my check payable to "Bardavon"
- Charge to my credit card: VISA AMEX MasterCard Discover

Account No. _____ Exp. Date: _____

Signature of Card Holder: _____

Mail to: Bardavon 1869 Opera House, 35 Market Street, Poughkeepsie, New York 12601
 Fax to: 845-473-4259

* Minimum membership donation \$75 per household / \$50 for Seniors 62+.
 Refer to our Giving/ Membership page for all giving categories

** Facility Charge (for credit card orders, charge is waived if paying cash or check)
 \$2.50 per ticket priced up to \$50
 \$4.50 per ticket priced up to \$100
 \$7.50 per ticket priced up to \$200