

# 2008-2009 Raue Center Order Form

## Orders Can Be:

- 1.) Dropped off at the box office: 26 N. Williams Street, Crystal Lake
- 2.) Mailed: Raue Center For The Arts, 26 N. Williams Street, Crystal Lake, Illinois, 60014
- 3.) Faxed: 815.459.2965
- 4.) Phoned in: 815.356.9212

## Contact Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

## Payment Options

Enclosed is my check made payable to Raue Center For The Arts.

Please charge the full amount to my:  VISA  Mastercard  Discover

Please charge 50% of my order now  
and 50% on September 1, 2008 to my:  VISA  Mastercard  Discover

Acct. # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature (I agree to pay according to card issuer agreement.) \_\_\_\_\_

## Seating Preference/Special Needs

Center  Close as Possible  Main Floor  Balcony  Wheelchair  Aisle

## Ticketing Options

**1. Create Your Own Subscription**—Choose four or more performances and save 10% off the cost of single tickets.

Performance	Date & Time	# of Tickets	Price Each	Total
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Subtotal \$ \_\_\_\_\_  
Less 10% \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

Continues on Back →

# 2008-2009 Raue Center Order Form

## Orders Can Be:

- 1.) Dropped off at the box office: 26 N. Williams Street, Crystal Lake
- 2.) Mailed: Raue Center For The Arts, 26 N. Williams Street, Crystal Lake, Illinois, 60014
- 3.) Faxed: 815.459.2965
- 4.) Phoned in: 815.356.9212

## Contact Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

## Payment Options

Enclosed is my check made payable to Raue Center For The Arts.

Please charge the full amount to my:  VISA  Mastercard  Discover

Please charge 50% of my order now  
and 50% on September 1, 2008 to my:  VISA  Mastercard  Discover

Acct. # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature (I agree to pay according to card issuer agreement.) \_\_\_\_\_

## Seating Preference/Special Needs

Center  Close as Possible  Main Floor  Balcony  Wheelchair  Aisle

## Ticketing Options

**1. Create Your Own Subscription**—Choose four or more performances and save 10% off the cost of single tickets.

Performance	Date & Time	# of Tickets	Price Each	Total
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Subtotal \$ \_\_\_\_\_  
Less 10% \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

Continues on Back →

## Ticketing Options

**2. Family Subscription**—Choose four, family-friendly performances ★ and receive four tickets to each performance for only \$300. (Only 30 available!)

Performance	Date and Time	# of Tickets
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total \$ \_\_\_\_\_

**3. Season Pass**—Choose a season pass and receive one ticket to every performance and reception (some exclusions apply).

# of Passes \_\_\_\_\_ @ \$1,250 each

Total \$ \_\_\_\_\_

**4. Single Tickets**—Purchase individual tickets to the shows of your choice. If you are purchasing tickets to four or more performances, you are eligible to save 10% with the Create Your Own Series. Please see ticketing option 1.

Performance	Date & Time	# of Tickets	Price Each	Total
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total \$ \_\_\_\_\_

## Ticketing Options

**2. Family Subscription**—Choose four, family-friendly performances ★ and receive four tickets to each performance for only \$300. (Only 30 available!)

Performance	Date and Time	# of Tickets
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total \$ \_\_\_\_\_

**3. Season Pass**—Choose a season pass and receive one ticket to every performance and reception (some exclusions apply).

# of Passes \_\_\_\_\_ @ \$1,250 each

Total \$ \_\_\_\_\_

**4. Single Tickets**—Purchase individual tickets to the shows of your choice. If you are purchasing tickets to four or more performances, you are eligible to save 10% with the Create Your Own Series. Please see ticketing option 1.

Performance	Date & Time	# of Tickets	Price Each	Total
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total \$ \_\_\_\_\_

## Special Events

Clay Jenkinson The Great Debate	11/7/08	7:30 p.m.	Zone A ___@ \$50 Zone B ___@ \$40
Clay Jenkinson as Thomas Jefferson	11/8/08	7:30 p.m.	Zone A ___@ \$50 Zone B ___@ \$40
Fourth Annual Stargazers Ball	10/26/08	7:00 p.m.	___\$150 pp

Total \$ \_\_\_\_\_

Please add all ticketing option totals \$ \_\_\_\_\_

**Required \$5.00 per order facility fee** \$ \_\_\_\_\_ 5.00

Star Light, Star Bright Contribution \$ \_\_\_\_\_ 5.00

Mailing Fee \$ \_\_\_\_\_ 1.50

Grand Total \$ \_\_\_\_\_

## Special Events

Clay Jenkinson The Great Debate	11/7/08	7:30 p.m.	Zone A ___@ \$50 Zone B ___@ \$40
Clay Jenkinson as Thomas Jefferson	11/8/08	7:30 p.m.	Zone A ___@ \$50 Zone B ___@ \$40
Fourth Annual Stargazers Ball	10/26/08	7:00 p.m.	___\$150 pp

Total \$ \_\_\_\_\_

Please add all ticketing option totals \$ \_\_\_\_\_

**Required \$5.00 per order facility fee** \$ \_\_\_\_\_ 5.00

Star Light, Star Bright Contribution \$ \_\_\_\_\_ 5.00

Mailing Fee \$ \_\_\_\_\_ 1.50

Grand Total \$ \_\_\_\_\_