

2017 Season Membership

Please remove and mail to:
City Park Players
1101 Fourth Street, Suite 201, Box 6
Alexandria, LA 71301

The Stars

I want to be one:

Actor Tech Judge Donor

Name _____

Address _____

City _____

State _____ Zip _____ Phone _____

Please give us your email so we can keep in touch!

Email _____

Payment: Check Visa Mastercard Discover

Card # _____ Exp. Date _____ CID _____

Please make checks payable to: **City Park Players**

The Contributors

- ___ Friend: \$100 Program listing/ad + 1 Season Ticket
- ___ Patron: \$250 Program listing/ad + 2 Season Tickets
- ___ Sponsor: \$500 Program listing/ad + 4 Season Tickets
- ___ Benefactor: \$750 Program listing/ad + 6 Season Tickets
- ___ Underwriter: \$1000 Program listing/ad + Inclusion in all press releases + 6 Season Tickets + 2 Tickets to the 2017 Onstage Gala

The Subscribers

Season Tickets

___ General (x) \$50 = \$ _____

___ Senior (>60 years of age) (x) \$40 = \$ _____

___ Student (x) \$30 = \$ _____

TOTAL Enclosed \$ _____

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