

# 2011-2012 VIP SUBSCRIPTION ORDER FORM

_____ (# of seats) for Jazz Series 1	Wed/Thur \$446	Fri/Sat \$523	=	\$ _____
_____ (# of seats) for Jazz Series 2	\$300	\$350	=	\$ _____
_____ (# of seats) for Jazz Series 3	\$225	\$265	=	\$ _____
_____ (# of seats) for Jazz Series 4	\$155	\$185	=	\$ _____
_____ (# of seats) for Choose Your Own Series	\$ _____	\$ _____	=	\$ _____

Artists for CYO Series	Please consider a tax-deductible contribution to our annual fund	+	\$ _____
_____	Handling fee	+	\$ <u>10.00</u>
_____	SUBSCRIPTION TOTAL	=	\$ _____
_____	SINGLE TICKET TOTAL (from additional form)	+	\$ _____
_____	GRAND TOTAL DUE	+	\$ _____

DAY & TIME PREFERENCE (CIRCLE ONE)

TABLE PREFERENCE (SEE SEATING CHART)

Wednesday	7:30 p.m.		9:30 p.m.	1 <sup>st</sup> choice	_____
Thursday	7:30 p.m.		9:30 p.m.	2 <sup>nd</sup> choice	_____
Friday	7:30 p.m.		9:30 p.m.	3 <sup>rd</sup> choice	_____
Saturday	7:30 p.m.		9:30 p.m.	4 <sup>th</sup> choice	_____

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_

CIRCLE CARD:      MASTERCARD      VISA      AMERICAN EXPRESS      DISCOVER

CHECK MADE PAYABLE TO JAZZ ST. LOUIS      CHECK # \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY | STATE | ZIP: \_\_\_\_\_

DAY PHONE: \_\_\_\_\_

NIGHT PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

MAIL TO:      JAZZ ST. LOUIS, ATTN: BOB BENNETT  
 3547 OLIVE STREET, SUITE 260  
 ST. LOUIS, MO 63103 | OR FAX 314.289.4039