

step

1 SELECT YOUR SEASON TICKET TYPE AND QUANTITY

SEASON TICKETS GO ON SALE OCTOBER 1, 2021

Want to skip the line and get your seats now?

Join our Legacy Club as one of our major donors and receive many excellent benefits including first priority Season Tickets, preferred parking, souvenir merchandise, concessions priority and more. Call the Box Office and say, "I'd like to join the Legacy Club".

All Season Ticket packages are available at PLUS pricing too! What is PLUS pricing you ask? Well, the month of September is reserved for PLUS Season Ticket renewals. For a small upgrade you can skip the line and reserve your seats and dates first. Fill out this form and indicate your desire to upgrade to PLUS and you will skip to the head of the line.

LEGACY CLUB



TYPE:	AMOUNT:	QTY:	TOTAL:
2022 SEASON 9 SHOW STANDARD SEASON TICKET	ADULT: \$200		
	SENIOR 65+ & STUDENT: \$184		
	CHILD: \$120		
2022 SEASON ALL ACCESS SEASON TICKET	ADULT: \$250		
	SENIOR 65+ & STUDENT: \$230		
	CHILD: \$150		
2022 SEASON OPENING WEEKEND DISCOUNT SEASON TICKET	ADULT: \$175		
	SENIOR 65+ & STUDENT: \$161		
	CHILD: \$105		
SEASON TICKET Plus:	Per Season Ticket	\$25	
WRITE YOUR TOTAL HERE:			

Legacy Club & Season Ticket Plus Members are processed in September.

Priority is given to Legacy Club Members and Season Ticket Plus Members.

step

2 MARK YOUR DESIRED DATES

Indicate your first, second and third date choices by number.

- ① ② ③

The Buddy Holly Story
DECEMBER 2021
New Year's Eve Show is \$25 extra. 31
JANUARY 2022

M	Tu	W	T	F	Sat. 3pm	Sat.
			6	7	8	8
			13	14	15	15
			20	21	22	22

Oliver!

M	Tu	W	T	F	Sat. 3pm	Sat.
APRIL						
				1	2	2
			7	8	9	9
			14	15	16	16
			21	22	23	23
			28	29	30	30

Chitty Chitty Bang Bang

M	Tu	W	T	F	Sat. 3pm	Sat.
AUGUST						
				12	13	13
			18	19	20	20
			25	26	27	27
SEPTEMBER						
			1	2	3	3
			8	9	10	10

SPECIAL ENGAGEMENTS

Mary Poppins

M	Tu	W	T	F	Sat. 3pm	Sat.
JUNE						
				10	11	11
			16	17	18	18
			23	24	25	25
			30	1	2	2
JULY						
			7	8	9	9

Cinderella

M	Tu	W	T	F	Sat. 3pm	Sat.
JANUARY						
				28	29	29
FEBRUARY						
			3	4	5	5
			10	11	12	12
			17	18	19	19
			24	25	26	26

The Ark

M	Tu	W	T	F	Sat. 3pm	Sat.
MAY						
				6	7	7
			12	13	14	14
			19	20	21	21
			26	27	28	28
JUNE						
			2	3	4	4

Ragtime

M	Tu	W	T	F	Sat. 3pm	Sat.
SEPTEMBER						
				16	17	17
			22	23	24	24
			29	30	1	1
OCTOBER						
			6	7	8	8
			13	14	15	15

Twelfth Night

M	Tu	W	T	F	Sat. 3pm	Sat.
JUNE						
				3		4

One For The Pot

M	Tu	W	T	F	Sat. 3pm	Sat.
MARCH						
			4	5	5	
			10	11	12	12
			17	18	19	19
			24	25	26	26

Diary of Anne Frank

M	Tu	W	T	F	Sat. 3pm	Sat.
JULY						
				15	16	16
			21	22	23	23
			28	29	30	30
AUGUST						
			4	5	6	6

Anne of Green Gables

M	Tu	W	T	F	Sat. 3pm	Sat.
OCTOBER						
				21	22	22
			27	28	29	29
NOVEMBER						
			3	4	5	5
			10	11	12	12

A Christmas Carol

M	Tu	W	T	F	Sat. 3pm	Sat.
NOVEMBER						
				18	19	19
				25	26	26
DECEMBER						
			1	2	3	3
			8	9	10	10
			15	16	17	17
19	20	21	22	23		

CAN ONLY BE RESERVED BY AN ALL ACCESS SEASON TICKET UNTIL JAN. 1

step

3

CIRCLE YOUR DESIRED SEATS

Priority is given to Legacy Club Members and Season Ticket Plus Members.

What is more important to you?

- Dates (pick one)
- Seats
- I will choose later

Indicate your first, second and third date choices by number.

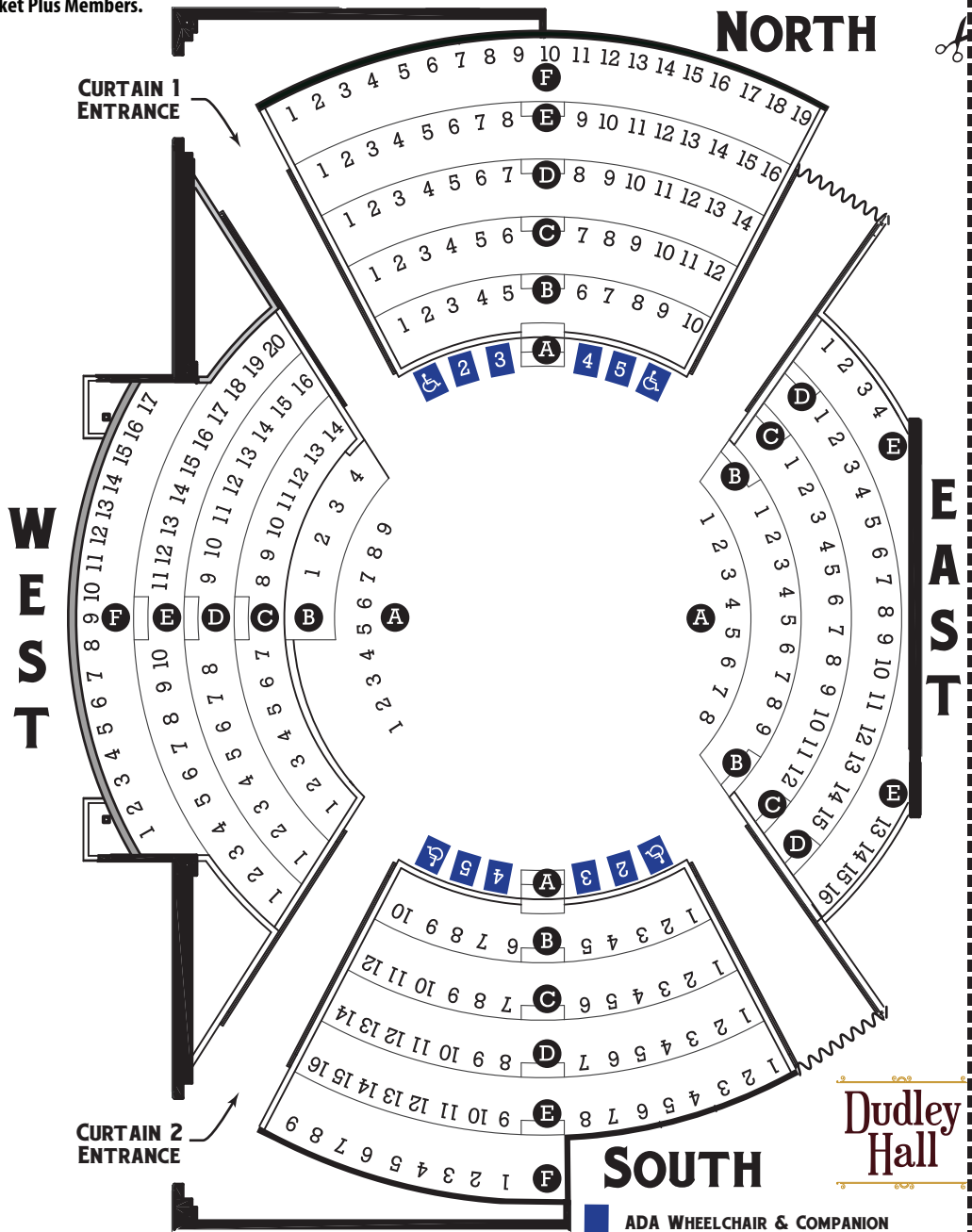
① ② ③

Please note your option of selecting a first, second, and third choice of seating and dates. We will accommodate your first choice to the best of our ability. But should your first choice be unavailable, we will fulfill your request based on your additional selections.

We fulfill these requests on a first come - first served basis so send in your renewal form as soon as possible.

Questions?

Call the Box Office
(817) 202-0600



ADA WHEELCHAIR & COMPANION

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4

COMPLETE PURCHASE AND BILLING INFORMATION

Name _____
 Address _____
 City _____ State _____ Zip _____
 Telephone (day) _____ (Evening) _____
 Email Address _____

Your Method of Payment: Check/Cash Mastercard / Visa / Discover / AmEx

Name on card: _____
 Credit Card No. _____
 Expiration: _____ Security Code: _____
 Signature _____

YOUR TOTAL:

\$ _____

Mail completed form to:

Plaza Theatre Company
305 S. Anglin St.
Cleburne, TX 76031