

Steps for Subscribing to Your Spartanburg Philharmonic

1 Select at least ONE Season Subscription Package

ZIMMERLI SERIES

Package Type	Gold	Silver	Bronze	# of Seats	Series Total
Concert 4 Pack	<input type="checkbox"/> \$162	<input type="checkbox"/> \$126	<input type="checkbox"/> \$90	X _____ = \$ _____	
Concert 5 Pack	<input type="checkbox"/> \$212	<input type="checkbox"/> \$176	<input type="checkbox"/> \$140		

ESPRESSO SERIES

Includes all **FOUR** concerts at Chapman Cultural Center

Package Type	Price	# of Seats	Series Total
<input type="checkbox"/> GENERAL ADMISSION	\$108	_____	= \$ _____

BLUEGRASS SPARTANBURG

Includes all **FOUR** concerts at Chapman Cultural Center

Package Type	Price	# of Seats	Series Total
<input type="checkbox"/> Gold	\$162	_____	= \$ _____
<input type="checkbox"/> Silver	\$126		

SPYO

Includes all **THREE** concerts at Twitchell Auditorium

Package Type	Price	# of Seats	Series Total
<input type="checkbox"/> GENERAL ADMISSION	\$30	_____	= \$ _____

+ NUTCRACKER ADD-ON (optional)

CHOOSE YOUR DATE

Date	Time	Adult	Youth	# of Seats	Nutcracker Add-On Total
<input type="checkbox"/> 12/13	7PM	<input type="checkbox"/> \$45 ea.	<input type="checkbox"/> \$25 ea.	_____	= \$ _____
<input type="checkbox"/> 12/14	3PM				
<input type="checkbox"/> 12/14	7PM				
<input type="checkbox"/> 12/15	3PM				

Tell us where you want your seats : _____

2 Choose Your Seats

- I'd like to **keep** my seats
- I'd like to **change** my seats to: _____

If my choice is unavailable, keep my previous season's seats.

3 Add It Up + Make A Donation

Total for all Series	\$ _____
+	
Box Office Processing Fee	\$ 15.00
+	
Tax-Deductible Donation	\$ _____
Grand Total	\$ _____

MAKE A PLEDGE OR DONATION TO THE PHILHARMONIC



Ticket sales cover **less than half** the cost of operation at the Spartanburg Philharmonic. Our mission is to enrich, inspire and educate the community through live performances of high-quality music. Please consider a tax-deductible donation to help support the Philharmonic's musical, educational and outreach programs.

I am not ready to give now, but I would like to pledge

\$ _____ Invoice me on this date: ____/____/____

Separate check enclosed : # _____

Please list my name in the program as : _____

I would like to remain **anonymous**

DONOR LEVELS

Member	\$100 - \$249
Patron	\$250 - \$499
Fellow Musician	\$500 - \$999
Principal*	\$1,000 - \$2,499
Baton*	\$2,500 - \$4,999

*Sponsors a Musician for the Season

5 Confirm / Update Your Address

Name : _____

Address : _____

City/State/Zip : _____

Phone : _____ Home Cell

Email : _____

4 Provide Your Payment

Check Enclosed : # _____
(made payable to Spartanburg Philharmonic)

Please charge my:

- Visa
- AmEx
- Mastercard
- Discover

Card # _____

Exp. Date : ____/____ CVV : _____ Zip : _____

Name on Card : _____

Signature : _____