

signature 2021/22 flexible subscription form

1. Tell us about yourself

Name: _____ Address: _____ Phone (Home): _____

Email: _____ Phone (Cell): _____

Signature does not trade patrons' email addresses.

Please write any seating partners: _____
(if they subscribe separately)

Please write any seating preferences: _____

I prefer dress circle seats (balcony) Aisle requested

Accessibility Requirements: Use wheelchair Use walker Cannot walk up/down steps Can walk up/down few steps Has visual impairment
 Has hearing impairment Other _____

2. Choose your shows and dates

Want all your shows on the same day or specialty performance? **FLIP OVER TO USE CLASSIC FORM**

- Choose a minimum of 3 shows.
- Tell us the performance type for each show – you can mix and match! See types and prices to the right.
- Tell us your available dates or day of week. Or leave the dates blank and we will find the best seats. Just list any unavailable dates on the line below.
- Note: You must choose the same number of seats for every show.**

SAMPLE	Show	Performance Type/Time	Available Dates/Day of Week	Tier	# Seats		Price		Total
	<input type="radio"/> Show #1	Sat. Evening	3/27, 4/3, 10, or 24	1	2	x	\$92	=	\$180
	<input type="radio"/> Show #2	Discussion	Flexible Dates? Leave this blank and we'll find the best seats	2	2	x	\$78	=	\$152

Performance Type/Time	Tier 1 Price Per Seat	Tier 2 Price Per Seat
First Week	\$70	\$60
Tues, Weds, Thurs, Sun Evenings	\$80	\$70
Friday Evenings	\$90	\$80
Sat/Sun Matinee	\$90	\$80
Discussion Nights	\$90	\$80
Saturday Evening	\$94	\$84
Pride Night Friday	\$94	\$84

I am unavailable on these dates: _____

Show	Performance Type/Time	Available Dates/Day of Week	Tier	# Seats	Price	Total	Special Events & Total	# Seats	Price	Total
<input type="radio"/> RENT	_____	_____	_____	_____	x \$ _____ = \$ _____	_____	Mainstage subscription total	_____	_____	\$ _____
<input type="radio"/> Daphne's Dive	_____	_____	_____	_____	x \$ _____ = \$ _____	_____	\$10 handling fee per person required	_____	x \$10 = \$ _____	_____
<input type="radio"/> She Loves Me	_____	_____	_____	_____	x \$ _____ = \$ _____	_____		_____	_____	_____
<input type="radio"/> Upstairs Department	_____	_____	_____	_____	x \$ _____ = \$ _____	_____	Signature Seminar registration	_____	x \$265 = \$ _____	_____
<input type="radio"/> We Won't Sleep	_____	_____	_____	_____	x \$ _____ = \$ _____	_____	Friends of Signature price \$220	_____	_____	_____
<input type="radio"/> The Color Purple	_____	_____	_____	_____	x \$ _____ = \$ _____	_____	Add a donation to support our reopening season	_____	_____	\$ _____
TOTAL MAINSTAGE SUBSCRIPTION							\$ _____	GRAND TOTAL		= \$ _____

3. Choose your payment method

Check payable to Signature Theatre Charge my credit card in full Charge my credit card in three consecutive, monthly payments
Check # _____

Name as it appears on card _____ Card # _____

Final date payment plans are accepted is September 1
Initial payment will be charged on receipt and then every 30 days until completed

CW _____ Exp. Date _____ Signature _____

All sales are final. No refunds. All performance days, times, and series are subject to availability and change. Other discounts cannot be applied. Signature makes every effort to honor seating partners, requests and dates, but cannot guarantee.

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