



RENEW YOUR SUBSCRIPTION BY APRIL 30

AND YOU CAN WIN AN OPPORTUNITY TO MEET ONE OF OUR BIG NAMES

(See back for details)

SUBSCRIBER INFORMATION:

SUBSCRIBER NAME: _____ PATRON ID: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS PHONE: _____

E-MAIL: _____

E-mail is the best and sometimes only way to receive advance notices, special invitations, and show updates.

2018—2019 SEASON RENEWAL

RENEW TODAY!

RENEW BY PHONE

916.388.1100

FOR PERSONAL SERVICE

PLEASE CALL

916.388.1100

Mon-Fri 9am-5pm

FAX ORDERS TO

916.388.5134

24 HOURS A DAY

RENEW ONLINE

sacramentospeakers.com

PLEASE RENEW MY SAME SEASON SUBSCRIPTION AS LISTED BELOW:

SEAT NUMBERS	QTY of SEATS	SEASON RENEWAL	SUBSCRIPTION TOTAL
<input type="text"/>	<input type="text"/>	x <input type="text"/>	= <input type="text"/>

TICKETING OPTION:

- Email e-tickets to me
 Mail printed tickets to me

Facility fee* per subscription

Handling fee**

The total due is

AMOUNT ENCLOSED

CHANGE MY SEASON SEATS IF POSSIBLE:

I understand that I will be assigned the same seats if no improvement is possible.

- Move my seats closer to the center
 Move my seats closer to the front
 Give me the best available seats in my section
 I would like to sit with another subscriber: _____

I am adding seats to my order and have chosen one of the following:

- If seats are not available next to me, please renew my current seat(s) and add seats as close as possible
 I will accept a different location so we can all sit together

I WISH TO PAY BY:

- Enclosed is a check payable to Society of Orators, LLC
 Extended payment plan. Available for credit card payments only if purchased prior to 04/30/18*** (If this box is **NOT** checked, entire payment will be processed on date of purchase)

Visa

Card Number: _____

MasterCard

Exp Date: ____ / ____

Billing Address (if different from above):

SUBSCRIPTION OFFICE

3001 I Street, Suite 300

Sacramento, CA 95816

* The City of Sacramento imposes a facility fee of \$3.00 per ticket for each of our six events (\$18.00 total)

** All orders are subject to a \$12.00 handling fee

*** Payment plan: first payment will be processed on day of purchase; second payment will be processed on 05/30/18; third and final payment will be processed on 06/30/18 (a one-time extended payment plan fee of \$5.00 will be charged at the time of purchase)

RENEW FOR THE SEASON BY APRIL 30 AND WIN!

When you renew your subscription you will automatically be entered into a drawing for a chance to win an opportunity to meet one of our BIG NAMES prior to their engagement.

To qualify, we must receive your subscription order by **Monday, April 30, 2018.**

SEASON SUBSCRIPTION INFORMATION, SEATING CHARTS AND PRICING:

EARLY SUBSCRIBER BENEFITS

Best prices, best seats, and the best possible personal service. By joining **Sacramento Speakers Series**, you will ensure that your season journey will be the ultimate experience! Subscribing to our **"BIG NAMES ARE COMING" 2018-2019 Season** is the only way to guarantee the best price and seats in your preferred location.

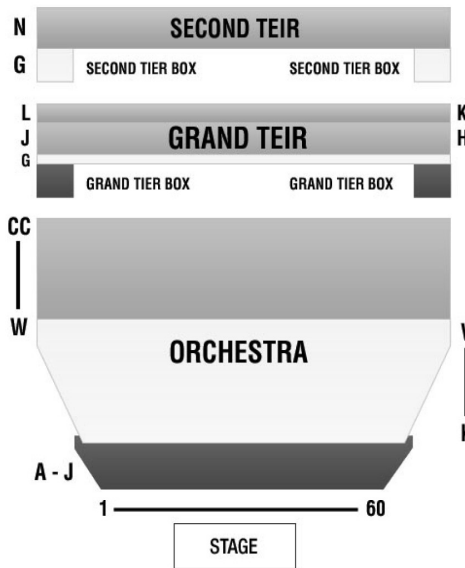
GUARANTEED BEST SEATS

Subscribers enjoy the best seats—guaranteed. Season subscribers (6 engagements) are seated first and keep the same seats for every performance.

LOCK IN THE BEST PRICES

All shows, all seats – subscribers get the best seats. Avoid price increases later in the season.

COMMUNITY CENTER THEATER



PLATINUM SILVER
 GOLD BRONZE

HCP Seating Available in All Sections

2018-2019 SEASON SUBSCRIPTIONS

Platinum	\$450
Gold	\$390
Silver	\$300
Bronze	\$240

HOW WE SEAT OUR SUBSCRIBERS

Between now and May, our subscription staff will reseat all our subscribers – one at a time! Here’s how we ensure that you get the seats you deserve:

- Renewing season subscribers who order by the deadline and keep their same seats are seated first.
- Renewing season subscribers who order by the deadline and request a seating change are seated next. Priority is determined by original date of purchase.

SPECIAL CONSIDERATIONS:

Please check if needed: Aisle seat Wheelchair Space

If you attend with friends, OR SHARE YOUR SUBSCRIPTION, please provide the following information:

Friends’ Name: _____

Phone: _____ E-mail: _____

Address: _____

City / State / Zip: _____

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