



Season Ticket Order and Donor Information

Please print all information clearly.

Name _____

Address _____

Phone _____ Alternate phone _____

E-mail _____

Please send CPP's *Callboard* to my e-mail address.

I wish to purchase the following season tickets.

Adult season tickets (\$56 each) (#) _____ \$ _____

Senior (64+)/student tickets (\$44 each) (#) _____ \$ _____

Total season ticket purchase \$ _____

I wish to become a Central Park Players season supporter.

Donor (\$50-\$99)

Patron (\$100-\$249)

Sponsor (\$250-\$499)

Producer (\$500-\$999)

Underwriter (\$1,000-\$1,999)

Director's Circle (\$2,000)

Total enclosed \$ _____

Please make checks payable to Central Park Players and send with this completed form to CPP, P.O. Box 564, Grand Haven, MI 49417. **Do not send cash.**

Season tickets will be mailed in September.