

SUBSCRIBE NOW AND SAVE UP TO 27%

Single tickets for The Nutcracker call the Twichell box office 864-596-9725 and Ballet Spartanburg 864-583-0339. For DanSynergy Dos, and Hansel and Gretel call 864-543-ARTS.

DanSynergy Dos Chapman Cultural Center	\$25 Adult	\$20 Senior	\$15 Student
The Nutcracker Twichell Auditorium	\$29 Adult	\$24 Senior	\$18 Student
Hansel and Gretel Chapman Cultural Center	\$25 Adult	\$20 Senior	\$15 Student
Hubbard 2 Chapman Cultural Center	\$28 Price A	\$24 Price B	

Ballet Spartanburg members, seniors and active military receive \$2 off, students receive half off price B

BALLET SPARTANBURG MEMBERS RECEIVE \$2 OFF PRICE OF Hubbard 2 PERFORMANCE



SEASON SUBSCRIPTION - Save up to 27%
DanSynergy Dos, The Nutcracker, Hansel & Gretel
children and students with school ID under 23

Adult Season Ticket _____ tickets @ \$60 ea = \$ _____
 Senior Season Ticket _____ tickets @ \$50 ea = \$ _____
 Student' Season Ticket _____ tickets @ \$35 ea = \$ _____

Season Subscription Total \$ _____

FAMILY CLASSIC PACKAGE - Save up to 23%
Nutcracker, Hansel & Gretel
children and students with school ID under 23

Adult Family Classic _____ tickets @ \$40 ea = \$ _____
 Senior Family Classic _____ tickets @ \$35 ea = \$ _____
 Student' Family Classic _____ tickets @ \$25 ea = \$ _____

Family Classic Package Total \$ _____

ANNUAL MEMBERSHIP

Apprentice \$50 to \$149 Ballerina's Circle \$500 to \$999
 Corps de Ballet \$150 to \$249 Ballet Mistress's Circle \$1,000 to \$2,499
 Soloist's Circle \$250 to \$499 Artistic Director's Circle \$2,500 & above

Membership Contribution Amount \$ _____

SPECIAL CONTRIBUTION

Scholarship Fund Matching Gift (My Company will match this contribution)
 Matching Gift form is included. Other _____

Special Contribution Amount \$ _____

TOTAL ENCLOSED \$ _____

Name as you wish it to appear in the program:

 Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone (Day) _____ (Eve) _____
 E-mail address _____
 I am/ We are: New supporters Renewing supporters

PAYMENT METHOD

I wish to pay _____ installments of _____
 My check is enclosed made payable to Ballet Spartanburg
 Charge my credit card: Visa MC

Enclose payment with form and mail to:
 Ballet Spartanburg
 200 East St. John Street
 Spartanburg, SC 29306

Account# _____ Exp. Date _____
 Signature _____