

**PROVIDENCE PERFORMING ARTS CENTER
2018-2019 BROADWAY SERIES
8 SHOW PACKAGE**

MISS SAIGON, ANASTASIA, CATS, CHARLIE AND THE CHOCOLATE FACTORY,
SCHOOL OF ROCK, WAITRESS THE MUSICAL, THE BAND'S VISIT AND HAMILTON

Series: A: Friday 7:30pm
 B: Saturday 8pm F: Tuesday 7pm
 C: Saturday 2pm G: Wednesday 7pm
 D: Sunday 1pm H: Thursday 7:30pm
 E: Sunday 6:30pm

	F - Tue Eve	G - Wed Eve	H - Thu Eve	A - Fri Eve	C - Sat Mat	B - Sat Eve	D - Sun Mat	E - Sun Eve	Senior/ Student	Senior/ Student	Senior/ Student	Senior/ Student
									Wed	Thu	Sat Mat	Sun Mat/Eve
G/C	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
MID ORCH	N/A	\$ 574.50	\$ 574.50	N/A	N/A	N/A	N/A	\$ 574.50				
REAR ORCH	N/A	N/A	N/A	\$ 544.50	N/A	\$ 544.50	N/A	N/A	N/A	N/A	N/A	N/A
SIDE ORCH	N/A	\$ 447.50	\$ 447.50	\$ 447.50	N/A	\$ 447.50	N/A	N/A	N/A	N/A	N/A	N/A
FDC	N/A	\$ 447.50	N/A	\$ 447.50	N/A	\$ 447.50	N/A	N/A	N/A	N/A	N/A	N/A
SDC	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				

of Seats _____

Option #1: Series: _____ Section: _____ COST PER SUB: _____

Option #2: Series: _____ Section: _____ TOTAL CHARGE: _____

Best Available Section Check Mark
Center section ACAP
Anywhere ACAP
Aisle necessary
Aisle if possible

\$25 per sub
HANDLING FEE: _____

TOTAL AMOUNT DUE: _____

Opt Out: _____

Select Acct. _____ Date of Order: _____ Operator: _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Night Phone: _____

Full Pay : _____ Eight Pay: _____ Four Pay: _____ Two Pay: _____

*Eight Pay thru 8/1, Four pay thru 11/1, Two pay thru 1/1, and full pay accepted anytime!

Email address: _____

A representative will contact you by telephone, within one business day, to obtain payment information. Please be sure to include the best daytime telephone number where you may be reached.