

SUBSCRIPTION FORM *for each show, circle date on calendar*

Name _____
 Address _____
 City _____
 State _____ Zip _____
 E-Mail Address _____
 Phone (H) _____ (W) _____

(Circle one) Renewal New

Location Preference

Left - Front Rows Right - Front Rows
 Left - Back Rows Right - Back Rows
 Last Season's Seats - (if available)

CHOOSE FROM OUR TWO PLANS BELOW:

Plan A - All six shows - \$70.00 (Save \$25.00)

Plan B - Any five shows - \$60.00 (Save up to \$15.00)

BOX OFFICE TICKETS - \$15.00 each; \$20.00 for musicals

of x \$ = \$

Number of Subscriptions Letter of Plan Price Per Subscription

Endow a Seat - \$150.00

\$

ANGEL - \$50.00

Anniversary Angel - \$94.00

Tax deductible Sustaining Fund Contribution

\$

Thank You!

\$
Total Amount Enclosed

Name of "Angel" to be listed in the program _____

Please Specify _____

Please send this form, your circled performance preferences, your check and a self-addressed, stamped envelope to:

THE VAGABOND PLAYERS • 806 S. Broadway • Baltimore, Maryland 21231

	FRI 8PM	SAT 8PM	SUN 2PM	FRI 8PM	SAT 8PM	SUN 2PM	FRI 8PM	SAT 8PM	SUN 2PM	FRI 8PM	SAT 8PM	SUN 2PM	FRI 8PM	SAT 8PM	SUN 2PM
THE COCKTAIL HOUR	9/4	9/5	9/6	9/11	9/12	9/13	9/18	9/19	9/20	9/25	9/26	9/27	-	-	-
THE CHRISTMAS BELLES	10/23	10/24	10/25	10/30	10/31	11/1	11/6	11/7	11/8	11/13	11/14	11/15	11/20	11/21	11/22
MAN OF LA MANCHA	1/8	1/9	1/10	1/15	1/16	1/17	1/22	1/23	1/24	1/29	1/30	1/31	2/5	2/6	2/7
THE DRAWER BOY	2/26	2/27	2/28	3/5	3/6	3/7	3/12	3/13	3/14	3/19	3/20	3/21	3/26	3/27	3/28
BRIGHTON BEACH MEMOIRS	4/16	4/17	4/18	4/23	4/24	4/25	4/30	5/1	5/2	5/7	5/8	5/9	5/14	5/15	5/16
THE WAITING ROOM	6/4	6/5	6/6	6/11	6/12	6/13	6/18	6/19	6/20	6/25	6/26	6/27	-	-	-