

BAYARTS ALLIANCE

MEMBERSHIP LEVELS

L E V E L S	★ Best Value ★ DOUBLE ANGEL	ANGEL	FRIEND	1/2 FRIEND	PARTICIPATING
Bay Arts Season Tickets Includes All Four Presenting Arts Series Shows	4 Season Tickets	2 Season Tickets	2 Season Tickets	1 Season Ticket	NONE
Bay Arts Single Ticket Discount	10%	10%	10%	10%	10%
Phone Purchase Service Charge	No Fees	No Fees	No Fees	No Fees	No Fees
Priority Purchase On Co-Promotional Shows (Select Shows)	Included	Included	Included	Included	Included
After-Show Reception Pass	Included	Included	Included	Included	
VIP Lounge Pass (Open pre-show & intermission)	Included	Included			
Tax Deductible Amount	\$20	\$190	\$40	\$30	\$50
Presenting Arts Series Parking Pass	Included	Included			
Ticket Savings	\$166 SAVINGS!	Add two extra season seats at Double Angel for savings!	\$53 SAVINGS!	\$16.50 SAVINGS!	10% Off BAA Tickets
Membership Cost At This Level	\$640	\$500	\$350	\$185	\$50

JOIN BAY ARTS ALLIANCE!

2010-2011 Membership Form

Name(s) _____ **Home Phone** _____ **Cell Phone** _____

(As you want it to appear in Publications)

Mailing Address _____ **Email** _____

Are you a renewing member? **YES** **NO**

MEMBERSHIP LEVEL:

DOUBLE ANGEL \$640 <input type="checkbox"/>	ANGEL \$500 <input type="checkbox"/>
FRIEND \$350 <input type="checkbox"/>	1/2 FRIEND \$185 <input type="checkbox"/>
PARTICIPATING \$50 <input type="checkbox"/>	SENIOR PARTICIPATING (62+) \$45 <input type="checkbox"/>

SEATING PREFERENCE: (Excluding Participating Memberships) **CHECK HERE TO KEEP YOUR SAME SEATS**

*We will seat you as close to your preference as possible AFTER the Current Member Renewal Deadline. The more flexible your preference is, the better the seating options we have for your season seats.

SECTION: STAGE <input type="checkbox"/> ORCH B <input type="checkbox"/> ORCH A or C <input type="checkbox"/> LOGE B <input type="checkbox"/> LOGE A or C <input type="checkbox"/> MEZZANINE <input type="checkbox"/>	DISTANCE: NEAR FRONT <input type="checkbox"/> MIDWAY <input type="checkbox"/> NEAR BACK <input type="checkbox"/>	SPECIFIC REQUEST: CENTRAL AISLE <input type="checkbox"/> OUTER WALL AISLE <input type="checkbox"/> HANDICAP ACCESSIBLE <input type="checkbox"/>	COMMENT: _____
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PAYMENT: Credit Card # _____ **Expiration Date** _____

We do not store credit card information on file, this document will be shredded for your security immediately after processing.

You may fax your renewal to 850-785-5165 or mail it to Bay Arts Alliance, P.O. Box 1153, Panama City, FL 32402. You may also pay by check.