

# 2017 RTC SEASON SUBSCRIPTION APPLICATION

## ADDRESS INFORMATION

Name:		
Phone Number:		
Email Address:		
Current Mailing Address:		
City:	State:	ZIP:
How Many <b>5 Play</b> Adult Passes (\$75.00 per pass):		
How Many <b>5 Play</b> Senior Passes (\$55.00 per pass):		
How Many <b>5 Play</b> Child Passes (\$55.00 per pass):		
How Many <b>3 Play</b> Adult Passes (\$45.00 per pass):		
How Many <b>3 Play</b> Senior Passes (\$30.00 per pass):		
How Many <b>3 Play</b> Child Passes (\$30.00 per pass):		

### PLEASE NOTE:

Subscribers' Seats are NOT guaranteed for a particular performance unless advance reservations are made.

### INSTRUCTIONS:

1. Print this form and fill it out
2. Make your check payable to: **RTC**
3. Send your completed application and check to:

**Rockaway Theatre Company**  
**P.O. Box 950398**  
**Far Rockaway, NY 11695-0398**

Your season pass will be mailed to you once it's processed.

**All applications must be POSTMARKED on or before  
February 28, 2017.**

All applications postmarked after this date will be returned unopened.