

OPTP Membership and Season Ticket Form

Join the Orangeburg Part-Time Players and enjoy a full season of quality entertainment at an affordable price.

Season tickets and memberships make wonderful gifts!

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home/Cell Phone: _____ Work Phone: _____

Email Address: _____

ANNUAL MEMBERSHIPS

_____ Junior OPTP Membership (under 16) x \$5.00 = \$ _____

_____ OPTP Membership x \$10.00 = \$ _____

_____ Family Membership = \$25.00

Annual Membership Total: \$ _____

SEASON TICKETS

_____ Season Tickets x \$40.00 (*save \$10!*) = \$ _____

Tickets Total: \$ _____



CHOOSE YOUR SEATS

Please place a mark beside the location and day requested for your season tickets, and note any special seating accommodations or considerations.

- Tier A (closest to the stage)
_____ Thurs 7:30pm _____ Fri 7:30pm _____ Sat 7:30pm _____ Sun 3:00pm
- Tier B (middle of the auditorium)
_____ Thurs 7:30pm _____ Fri 7:30pm _____ Sat 7:30pm _____ Sun 3:00pm
- Tier C (closest to the lobby/wheelchair accessible)
_____ Thurs 7:30pm _____ Fri 7:30pm _____ Sat 7:30pm _____ Sun 3:00pm

A GIFT TO THE BLUEBIRD

_____ I wish to make a contribution of \$ _____ to the BlueBird Theatre. My gift will help continue the tradition of live community theater in downtown Orangeburg.

- My gift is in honor of _____.
- My gift is in memory of _____.

All donations are tax-deductible, and will be recognized on social media and in our show programs unless indicated below.

_____ I wish to remain anonymous.

TOTAL AMOUNT ENCLOSED: \$ _____

Please make checks payable to **Orangeburg Part-Time Players** | Mail to **P.O. Box 1291, Orangeburg, SC 29116**