



PETERBOROUGH THEATRE GUILD

Silver (Half-Year) Membership

January 1 to August 31, 2012

— Two Plays & the *Spring Musical* —

"Give a Gift of Live Theatre!"

Office Use Only

Order #:

Name _____

Mailing Address _____ City _____

Postal Code _____ Phone _____

Donor's name (for gift memberships only) _____



Mail entire form to: **PTG Membership
364 Rogers Street
Peterborough ON K9H 1W7**

Single Membership {1 ticket per play} \$ 50.00 {SAS} \$ _____

Double Membership {2 tickets per play} \$ 95.00 {SAD} \$ _____

Student Membership {1 ticket per play} \$ 25.00 {SST} \$ _____

Donation to the Guild (Do you wish a receipt? Yes ___ No ___) \$ _____

Total \$ _____

Method of Payment

Cheque is enclosed for \$ _____ Dated _____ No postdated cheques please.

Charge to my: Visa () MasterCard ()

_____ Expiry Date ____ / ____

Signature for credit card approval _____ Date _____

Personal information provided to the PTG on this form will be used only for the purposes of processing your membership order & providing you with information about the Guild and its productions. Our privacy policy is available at the Box Office or on our website.

* Note: A play may be substituted for the Musical *

For Office Use Only: Membership Number _____ Date Processed _____