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Season of Three Plays

Adults _____ @ \$60 each \$ _____
(savings of 20% over per ticket price)

Season of Three Plays

Seniors _____ @ \$54 each \$ _____
(savings of \$18 over regular season ticket price)

TOTAL \$ _____

Check preference for day of week of performance

Thu Fri Sat Sunday Matinee

OR Specify dates _____

Desired seat assignments _____

PAYMENT METHOD Check

Make checks payable to **Town of Danville**

Visa Master Card

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Complete your order by subscribing:

Online at www.villagetheatreshows.com

OR call (925) 314-3400 (Danville Community Center)

OR mail to **Role Players Ensemble Theatre**
P.O. Box 304, Danville CA 94526

I would like to make a tax deductible donation of \$ _____
to Role Players Ensemble Theatre.

*Your donation check should be made separately from your
subscription, and should be made payable to **Role Players
Ensemble Theatre**, P.O. Box 304, Danville CA 94526*