

Ticket packages can be ordered using the form or by calling the box office now at 925-973-3343. Individual show tickets can be ordered from the box office or online beginning September 6, 2016.

**1 CHOOSE YOUR SERIES**

Series	Number of Seats	Price
Full Season – \$181 per seat (same seats for all performances) Options: VIP seats available for all four shows below	X _____ seats Add additional tickets to any show by completing the form below.	= \$ _____

**2 ORDER SINGLE TICKETS** (Select Additional Tickets at the Season Price for Season Subscribers or Upgrade to the VIP Cabaret Seating)

Performance	Date/Time	Youth Tickets	Season Subscriber Tickets	VIP Cabaret Seating	Total
Shanghai Acrobats	Saturday, September 24, 2016 at 7:00pm	\$15 X _____	\$39 X _____		= \$ _____
The Pointer Sisters	Sunday, November 6, 2016 at 7:00pm		\$54 X _____	\$85 X _____	= \$ _____
A Classic Rock Christmas	Sunday, November 20, 2016 at 7:00pm		\$41 X _____	\$70 X _____	= \$ _____
Rhythm in the Night	Saturday, March 4, 2017 at 8:00pm		\$41 X _____	\$70 X _____	= \$ _____
Average White Band	Friday, March 31, 2017 at 8:00pm		\$45 X _____	\$75 X _____	= \$ _____
Total					_____

**All Season tickets will be automatically mailed to the address listed below.**  
**For questions regarding VIP Cabaret Seating contact the box office at 925-973-3343.**  
*Prices listed include \$1 Cultural Growth Fee Per Ticket*

**3 SEATING REQUEST**
**SEATING:**

- Please Renew My Same Seats From Last Year
- Please Change My Seats (Please complete special seating request)
- Need New/Additional Season Seating

Special Seating Request: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*We will make every effort possible to accommodate special seating requests.  
 If no seating requests are made you will retain your original seating.*

**4 CONTACT AND PAYMENT INFORMATION**
**Grand Total \$** \_\_\_\_\_

Name \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_@\_\_\_\_\_

**Method of Payment**  Cash  Check Check # \_\_\_\_\_  
 Visa  MasterCard  American Express  
 Card Number \_\_\_\_\_  
 Name on Card \_\_\_\_\_ Amount Authorized \$ \_\_\_\_\_  
 Signature \_\_\_\_\_ Exp Date \_\_\_\_\_

**5 SUBMIT YOUR ORDER** Accepted by Mail, Fax, Phone or at the Box Office

**Mail or Box Office:**

Dougherty Valley Performing Arts Center  
 10550 Albion Rd (on the Dougherty Valley High School Campus)  
 San Ramon, CA 94582

**Box Office Hours:** Tuesday – Friday 12pm – 5pm, and 1 hour before performances.

**Phone:** 925.973.3343

**Fax:** 925.803.9381

**Online:** [www.SanRamonPerformingArts.com](http://www.SanRamonPerformingArts.com)