

# TAKE YOUR SEAT

- Please accept my donation of \$ \_\_\_\_\_ for \_\_\_\_\_ seat(s) at \$350 each.

Seats are assigned by lottery. Multiple seats can be grouped together upon request.

I would like the following message (50-character limit) inscribed on my seat plaque(s):

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## PERSONAL INFORMATION

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Name(s) as it should appear on the tax receipt

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Address

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City

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Province

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Postal Code

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Email

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Phone

## METHOD OF PAYMENT

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Credit Card #

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Exp. date

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Name on card

- I will mail in a cheque made payable to the Arts Club Theatre Company.

[Email](#)

ARTS CLUB THEATRE COMPANY  
BMO THEATRE CENTRE, 203 - 162 WEST 1ST AVENUE, VANCOUVER, BC V5Y 0H6  
ARTSCLUB.COM TEL 604.687.5315 FAX 604.688.3273