

# FLEX PASS ORDER FORM

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

## 1 SUBSCRIBE WITH A FLEX PASS

**FLEX PASS = 4 tickets, good for any performance**

To purchase tickets to individual shows, visit  
[www.artistsensemble.org/tickets](http://www.artistsensemble.org/tickets)

## 2 HOW MANY?

FLEX PASS(ES)      No. \_\_\_\_\_ x \$100 = \$ \_\_\_\_\_

HANDLING CHARGE \$ +2.00

Optional but *deeply* appreciated donation \$ \_\_\_\_\_

**TOTAL \$ \_\_\_\_\_**

Optional: Know your preferred performances? Tell us!  
(EXAMPLE: *1st Sat. at 4pm OR just write in your dates.*)

**CHECK** if you require special needs seating.

## 3 PAYMENT

**CHECK**     **CREDIT CARD**     Visa     MasterCard

16-digit card # \_\_\_\_\_

3-DIGIT CODE \_\_\_\_\_ EXP. DATE \_\_\_\_\_

**E MAIL:**    [boxoffice@artistsensemble.org](mailto:boxoffice@artistsensemble.org)

**OR CALL:**    815.394.5004    open 11-3, Mon.–Fri.

**OR MAIL:**    Artists' Ensemble Theater  
P.O. Box 1684 • Rockford IL 61110