



Pampa Community Concert Association

SEASON TICKET ORDER FORM

NAME _____ PHONE _____

ADDRESS _____ CITY _____ ZIP _____

EMAIL _____

Order Number of Tickets—

___ Adult(s) @ \$40 each

___ Student(s) @ \$25 each (or free if accompanied by Adult Ticket holder)

We would not be able to offer the quality performances at such reasonable rates without our Patron Plan.

Patron donations are tax-deductible, but do NOT include concert membership tickets.

Total Monies Enclosed:

Membership \$ _____

Patron Plan \$ _____

TOTAL \$ _____

Make checks payable to:

Pampa Community Concert Association

PO Box 1935

Pampa, TX 79066

If you are supporting our Patron Plan,

How would you like us to list your name on program : _____

If you are supporting our Patron Plan but wish to remain anonymous, please check box []