

PSO 2009-2010 Subscription/Ticket Order Form

Please print, complete, and mail with checks payable to:

Piedmont Symphony Orchestra

P.O. Box 509

Warrenton, VA 20188

PSO Season Subscriptions - ALL FIVE CONCERTS (Save 10% on ticket prices at the door!)			
TYPE	PRICE	QUANTITY	TOTAL
ADULT SUBSCRIPTION	\$90.00		\$
SENIOR SUBSCRIPTION	\$67.50		\$
CHILD SUBSCRIPTION	\$22.50		\$
PSO Single Tickets			
Master Classics 1 • 10/25/09	PRICE	QUANTITY	TOTAL
ADULT	\$20.00		\$
SENIOR	\$15.00		\$
CHILD	\$5.00		\$
Master Classics 2 • 12/6/09			
ADULT	\$20.00		\$
SENIOR	\$15.00		\$
CHILD	\$5.00		\$
Master Classics 3 • 2/14/10			
ADULT	\$20.00		\$
SENIOR	\$15.00		\$
CHILD	\$5.00		\$
Master Classics 4 • 4/10/10 or 4/11/10			
ADULT	\$20.00		\$
SENIOR	\$15.00		\$
CHILD	\$5.00		\$
Master Classics 5 • 6/6/10			
ADULT	\$20.00		\$
SENIOR	\$15.00		\$
CHILD	\$5.00		\$
SUBTOTAL:			\$
Please consider a tax-deductible donation to the Piedmont Symphony Orchestra. Your generous support helps to ensure future programs of the PSO.			
Please accept my donation to the PSO in the amount of:			\$
GRAND TOTAL ENCLOSED:			\$

PSO SUBSCRIBER INFORMATION

SALUTATION *(Please circle one):*

Mr. Mrs. Ms. Dr.

FIRST NAME: _____ **LAST:** _____

BUSINESS NAME: _____

WEBSITE: _____

STREET: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL: _____

PHONE: _____ **SECONDARY PHONE:** _____

BEST WAY/TIME TO REACH YOU: _____

I am interested in *(Please check all which may apply):*

___ **Joining the PSO**

___ **Volunteering for the PSO**

___ **Season Sponsorship Opportunities**

___ **Advertising my business/service with the PSO**

___ **Joint Concert Performances**

___ **Joining the PSO Board of Directors**

___ **Receiving invitations to special PSO events**

___ **Having the PSO perform at my event**

___ **Making a designated financial gift to PSO**

___ **Establishing the PSO Endowment Fund**

___ **OTHER:** _____

Thank you for your support of the Piedmont Symphony Orchestra!