



# MS Society/Therry Dramatic Society

## Season 2017 Booking Form



Step 1 Contact Details	
Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
First Name:	Surname:
Postal Address	
Suburb:	Post Code:
Email:	
Daytime phone no ( )	Mobile

### Step 2 Booking Details

Please select the **NUMBER** of tickets you wish to purchase for each production. Discounts apply for concession card holders however proof of eligibility must be supplied as indicated below.

☐ Pensioner Concession Card ☐ Health Care Card ☐ Commonwealth Seniors Health Card

Card number/s:

Name of production	Date of production	No. Adults	No. Concessions
<b>My Friend Miss Flint</b> Written by Donald Churchill & Peter Yeldham	Wednesday 15 <sup>th</sup> February @ 8pm	____@ \$25	____@ \$20
<b>Fiddler on the Rood</b> Book by Joseph Stein based on Sholem Aleichem's stories, by special permission of Arnold Perl	Wednesday 14 <sup>th</sup> June @ 8pm	____@ \$32	____@ \$27
<b>Jane Eyre</b> Adapted by Willis Hall from the Charlotte Bronte novel	Wednesday 23 <sup>rd</sup> August @ 8pm	____@ \$25	____@ \$20
<b>It Could Be Any One of Us</b> Directed by Kerrin White by playwright Alan Ayckbourn	Wednesday 8 <sup>th</sup> November @ 8pm	____@ \$25	____@ \$20
Tickets to each of the four productions		____@ \$95	____@ \$75
TOTAL PAYMENT		\$	

☐ Plus a tax deductible donation of \$ \_\_\_\_ (optional)

(NOTE: we cannot offer refunds unless tickets are re-sold) TOTAL: \$

### Step 2 Special Assistance

Do you have any special seating requirements we should consider when allocating your seating?

☐ First few rows in theatre ☐ Wheelchair ☐ Aisle Seating ☐ Other \_\_\_\_\_

### Step 3 Method of Payment

☐ Enclosed is my cheque/money order payable to The MS Society of SA & NT

☐ Please debit my credit card as shown, authorised by my signature

☐ MasterCard ☐ Visa

Credit Card Number \_\_\_\_\_

Card Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Please return Fundraising, MS Society of SA & NT, PO Box 377, Salisbury South BC SA 5106  
fax to (08) 8164 1599. Enquiries please call 08 7002 6500 or email [events@ms.asn.au](mailto:events@ms.asn.au)