

# THE SAINT PAUL CHAMBER ORCHESTRA

## CREATE YOUR OWN PACKAGE

Choose 4 or more concerts at the Ordway to create a season ticket package that is perfect for you.

**Ordway Series:** scale 1 (\$50), scale 2 (\$30) or scale 3 (\$12)

**WORKSHEET:** List the concerts you would like to attend (*minimum 4 concerts*)

	DATE	TIME	PRICE (\$12, \$30 or \$50)
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

**SUBTOTAL** =

**SUBTOTAL** from above  x  adults per concert =

Number of children or students per concert:  =  **FREE**

**TAX-DEDUCTIBLE CONTRIBUTION** Thank you! +

**ORDWAY FACILITY FEE** +  **\$5.00**

This fee is required on all ticket orders for Ordway performances and helps fund necessary maintenance of the venue. Season ticket holders pay lower service fees than individual ticket buyers, so renew your subscription and save!

**SERVICE FEE** +  **\$15.00**

*Order by June 30 and save \$5 off your service fee!  
Regular service fee of \$15 is included here. If ordering before June 30, cross out the \$15 fee and write \$10.*

**TOTAL DUE**



### PAYMENT TYPE

- CHECK (payable to SPCO) enclosed  
 CREDIT CARD (Visa, MC, AmEx, Discover)

CREDIT CARD NUMBER \_\_\_\_\_

EXPIRATION \_\_\_\_\_

BILLING ZIP \_\_\_\_\_

SIGNATURE \_\_\_\_\_

CVV CODE \_\_\_\_\_

Complete this form and mail it with payment to SPCO Ticket Office, CM9480, PO Box 70870, Saint Paul, MN 55170-9480 or call our Ticket Office at 651.291.1144 to order. You can also order online at [thespco.org/cyo](http://thespco.org/cyo). Holiday performances of Bach's *Brandenburg* Concertos (Dec 9-19) are not eligible for a Create Your Own Package. Create Your Own Package patrons are not guaranteed the same seats for each concert. You will receive the best available seats after all set series season ticket holders are seated. Some concerts may be unavailable for a Create Your Own Package based on set series season ticket sales.

### CONTACT INFORMATION

NAME \_\_\_\_\_

EMAIL ADDRESS *required for order confirmation* \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY / STATE / ZIP \_\_\_\_\_

DAY PHONE / EVENING PHONE \_\_\_\_\_