



SEASON ORDER FORM

Please fill out the form below completely and return to WP Theater by **October 23, 2016.**

CHOOSE YOUR SUBSCRIPTION

OPTIONS	QUANTITY	PRICE	TOTAL AMOUNT
FLEX PASS	_____	x \$35	= \$ _____
ALL ACCESS	_____	x \$65	= \$ _____
VIP	_____	x \$500	= \$ _____
DONATION	_____		= \$ _____

YOUR CONTACT INFORMATION

NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 EMAIL _____
 PHONE _____

PAYMENT OPTIONS

___ ENCLOSED IS A CHECK FOR \$ _____ PAYABLE TO "WP THEATER"

MAIL ENROLLMENT FORM & CHECK TO: WP
 THEATER
 SUBSCRIPTION SERVICES
 55 WEST END AVENUE
 NEW YORK, NY 10023

___ PLEASE BILL MY CREDIT CARD FOR \$ _____

___ AMERICAN EXPRESS ___ VISA ___ MASTERCARD ___ DISCOVER

NAME ON CARD _____

CARD NUMBER _____

EXPIRATION _____ SECURITY CODE _____

BILLING ZIP CODE _____ SIGNATURE _____

EMAIL FORM TO SUBSCRIPTIONS@WOMENSPROJECT.ORG

PURCHASE OVER THE PHONE (212) 765-1706 MON-FRI 10AM-5PM

All sales are final. No refunds or exchanges. Schedule and programming subject to change. Deadline for all subscriptions orders is October 23, 2016. **Thank you for your subscription and support!**