Baroque Music Festival
Corona del Mar

2019 Subscription & Single-Ticket Order Form

Name(s):_____

_____

Please print! Festival Subscribers/supporters, this is how your name(s) will appear in the Festival Program if your order is received by May 31.

Below, please print full mailing address to which tickets should be mailed: Number & Street, City, State & Zip. (Ticket orders received less than a week before a concert date may be held at the door.)

Address: _____

_____

Telephone: _____ E-mail: _____

Festival Subscriptions (premium-seat tickets for all five concerts plus private dinner following the concert on Sunday, June 30th) .....QTY ____@ $280 = $ _____

Single tickets · *open seating*

Back to Bach Concertos .....Sunday, June 23, 4 p.m. .....QTY ____@ $ 40 = $ _____

Glories of the Guitar .....Monday, June 24 8 p.m. .....QTY ____@ $ 30 = $ _____

Passionate Voices .....Wednesday, June 26, 8 p.m. .....QTY ____@ $ 45 = $ _____

Bach's Sons, Friends & Rivals .....Friday, June 28, 8 p.m. .....QTY ____@ $ 50 = $ _____

Festival Finale: Bach the Magnificent.....Sunday, June 30, 4 p.m. .....QTY ____@ $ 40 = $ _____

Additional tax-deductible contribution .....$ _____

❑ Philanthropist ($10,000+) ❑ Partner ($5,000+) ❑ Benefactor ($3,000+) ❑ Patron ($1,000+)
❑ Donor ($500+) ❑ Contributor ($300+) ❑ Friend ($125+)

For further named underwriting opportunities, please visit the "Support" section of *www.bmf-cdm.org*

Shipping/Handling Fee.....$ 5.00

Total Amount.....$ _____

❑ My check payable to **Baroque Music Festival CdM** is enclosed.

❑ Please charge my credit card in full (circle one): VISA MasterCard DISCOVER AMERICAN EXPRESS

Card Number: | | | | | | | | | | | | | | | | |

Card Expiration Date: Month(m/m) | | Year(y/y) | |

Verification No. | |

Your signature: _____

(For credit card orders)

Mail to: Baroque Music Festival CdM
P.O. Box 838 · Corona del Mar, CA 92625-0838
Thank you!