

CAROLINA
VOICES



63
YEARS
of SONG

Complete and email to nbartlett@carolinavoices.org or mail to

Carolina Voices, 1900 Queens Road, Charlotte, NC 28207

SUBSCRIPTION ORDER FORM - CHOOSE 3 OR MORE SHOWS!

Impromptu - Monsters & Monstrosities

Friday, October 27 7:30pm	_____	x	\$15 ea.	\$
Saturday, October 28 7:30pm	_____	x	\$15 ea	\$

Festival Singers - Reflections

Sunday, November 5 4:00pm	_____	x	\$15 ea	\$
-----------------------------	-------	---	---------	----

MainStage - Singing Christmas Tree

Saturday, December 9 3:00pm	_____	x	\$35 ea	\$
Saturday, December 9 7:30pm	_____	x	\$35 ea	\$
Sunday, December 10 4:00pm	_____	x	\$35 ea	\$

MainStage - Singing Christmas Tree for KIDS

Saturday, December 9 11:00am	_____	x	\$15 ea	\$
Sunday, December 10 1:30pm	_____	x	\$15 ea	\$

Festival Singers - Celestial Sounds

Sunday, April 29 4:00pm	_____	x	\$15 ea	\$
---------------------------	-------	---	---------	----

MainStage - BIG SING Animated

Saturday, May 12 3:00pm	_____	x	\$15 ea	\$
Saturday, May 12 7:30pm	_____	x	\$20 ea	\$

Impromptu - Creative a Cappella

Saturday, June 23 3:00pm	_____	x	\$15 ea	\$
Saturday, June 23 8:00pm	_____	x	\$15 ea	\$

TOTAL # of TICKETS

a TOTAL PRICE

b TOTAL # of TICKETS x \$2 Facility Fee Per Ticket	_____	\$
--	-------	----

c Sum of TOTAL PRICE + Facility Fees (ADD box a + b)	_____	\$
--	-------	----

d ADD 7.25% sales tax (Box c * .0725)	_____	\$
---------------------------------------	-------	----

e Please consider adding a Tax-Deductible Donation.	_____	\$
---	-------	----

GRAND TOTAL (Add boxes c + d + e)	_____	\$
--	-------	-----------

Buyer Information and Payment Method:

Name _____

Address _____

City, State, Zip _____

Phone _____ Email _____

Check: Made out to Carolina Voices Credit: VISA / MasterCard / Discover

Name On Card _____

Credit Card # _____

EXP Date 3 Digit Code Billing Zip