

SEASON TICKET APPLICATION – 2017/18

BLOCK LETTERS PLEASE.

Title & Name(s).....
Address.....

Postcode.....
Email.....
Daytime Phone Number

MILLER CENTRE USE ONLY

Date of Receipt/2017
 Total Paid £.....
 Name on Cheque.....
 Credit Card Entry/2017
 Date of Database Entry...../2017
 Date Tickets sent/2017

Existing Season Ticket Holder Yes / No Club/MCTC Membership Number.....

All tickets include a £1 Miller Centre Restoration Levy. This sum will be paid to The Park Hill Trust, (registered charity: 258420) the owner and manager of the building, to contribute towards the cost of essential works.

Ticket prices, inclusive of the Restoration Levy, for the 2017/18 Season will be £9 on the First Thursday and £11 for every other performance.

The 2017/18 Season Ticket covers the 9 productions by the Theatre Company at the Miller Centre but each Season Ticket holder will be entitled to one free ticket for the Young Players production in July 2018. If you wish to take up this free ticket please indicate which performance you require. Full details of the production will be available in 2018.

Young Players Production	Fri 20 July Evening		Sat 21 July Matinee		Sat 21 July Evening
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ALL APPLICATIONS ARE DEALT WITH IN ORDER OF RECEIPT. THOSE WISHING TO RETAIN THEIR CURRENT SEATS SHOULD APPLY NO LATER THAN 26 JUNE 2017.

Data Protection Act 1998: All personal information included on this form will be held on The Miller Centre's computer database **except** for your Payment Card details (which we will shred).

Please enter the number of Season Tickets you require against your chosen day(s)

1 st Thursday	
1 st Friday	
1 st Saturday	

Monday	
Tuesday	
Wednesday	

2 nd Thursday	
2 nd Friday	
2 nd Saturday	

Normal Seat Preference if any (e.g. A1 we will allocate nearest available).....

Payment First Thursday Season Tickets @ £81 each £.....
Other Night Season Tickets @ £99 each £.....

Total Amount Due

£.....

I enclose a cheque for the Total Amount Due payable to **'The Miller Centre Theatre Company'**

I wish to pay the Total Amount Due via a debit/credit card and have entered its details below.

Cheques will be cashed and cards charged on receipt. Tickets will be despatched in August.

Signed..... Date.....

The whole completed form should be sent to **THE MILLER CENTRE, 30 GODSTONE ROAD, CATERHAM, CR3 6RA.**
 Tel: 01883 349850 Please do not include anything else with this form and clearly mark your envelope **'Season Tickets'**

Payment Card Details. Please charge the **Total Amount Due** of £..... to: -

Card Number	Expiry Date	Security No. on back of card
-----	__ / __	__ __ __ (last 3 digits)

Print Name as it appears on the Card

Cardholder's Signature