

# The Lakeland Cultural Arts Center

## 2020 Membership

### JOIN THE LAKELAND FAMILY

Please return this page along with your check or credit card information to:

Lakeland Cultural Arts Center P.O. Drawer 130, Littleton, NC 27850

*Thank you in advance for your support!*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

### **NEW SEASON TICKET OPTIONS**

- Subscribers will receive tickets for 6 Mainstage shows and 2 Mark Taylor Singers performances. You will be able to select the seats and nights of your choice, based on availability. Tickets are printed and given to you, ending your time at will call and calling for tickets. Tickets can be switched at no additional cost.
- Subscription is based on the next six main stage shows regardless of when you sign up

*Benefits shown are for productions at the Lakeland Theatre only! See brochure for more information*

#### **Entry Level Memberships**

#### **Membership Level Desired**

**FRIEND**      \$4.00 off one ticket each production

\$25.00

**PATRON**      \$4.00 off two tickets each production

\$50.00

#### **SEASON SUBSCRIPTION**

*6 Mainstage shows and 2 Mark Taylor Singers performances*

\$115.00 year / \$9.58 monthly

#### **VIP SUBSCRIPTION**

*6 Mainstage Shows and 2 Mark Taylor Singers performances, all VIP receptions*

\$180.00 year / \$15.00 monthly

#### **PAYMENT INFORMATION**

Check Enclosed

—-or—-

Total Amount Paid: \$ \_\_\_\_\_

Charge my credit card

(circle one)    Visa    MasterCard    Discover

Number: \_\_\_\_\_ CSC Code\* \_\_\_\_\_ Expiration Date: (MM/YY) \_\_\_\_\_

- The three-digit code on the back of the card.

*Arrangements can be made to pay membership dues over a period of time  
see back of this form or call: (252) 586-3124*

**Lakeland Theatre & Cultural Arts Center**  
**Automatic Credit Card Billing Authorization Form**

If you would like to enjoy the convenience of automatic billing, simply complete the credit card information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing at any time by contacting us.

**Payment Information:**

I authorize Lakeland Arts Center to automatically bill the credit card listed below as specified:

Amount: \$ \_\_\_\_\_

Frequency: \_\_\_\_\_ Weekly \_\_\_\_\_ Bi-weekly \_\_\_\_\_ Semi-Monthly \_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly  
\_\_\_\_\_ Semi-Annually \_\_\_\_\_ Annually

Start billing on: \_\_\_\_/\_\_\_\_/\_\_\_\_      End billing when: \_\_\_\_\_ Customer provides written cancellation  
Contract expires on: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Credit Card Information:** (To be completed by customer)

Lakeland Theatre & Cultural Arts Center accepts the following credit cards: Visa, MasterCard & Discover

Credit Card Type: \_\_\_\_\_ Credit Card Number: \_\_\_\_\_

Expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_      CSC (code on back of card at end of signature): \_\_\_\_\_

Cardholder's name: \_\_\_\_\_ Credit card billing zip code (required): \_\_\_\_\_

Customer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Simply choose the membership type and then divide by the number of payments wanted.

Weekly= 52 payments    Bi-weekly= 26 payments    Semi-monthly= 24 payments

Monthly= 12 payments    Quarterly= 4 payments    Semi-annual= 2 payments