

Subscriptions












SUBSCRIBE ONLINE CHAMBERORCHESTRA.ORG, BY PHONE 215.545.1739, OR BY MAIL.

1 Select Your Subscription: 6 Series 3 Series

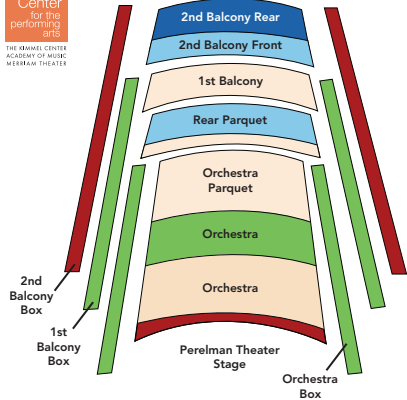
- October 6-7, 2019 | Martinez Plays Mozart
- November 3-4, 2019 | All Beethoven
- January 26-27, 2020 | Music of the Enlightenment
- February 23-24, 2020 | À la Française
- April 5-6, 2020 | Music of Dance, Ballet to Bandoneon
- May 17-18, 2020 | Tchaikovsky & Beethoven

2 Select Your Concert Day: Sunday Monday

3 Select Your Seating: (6 SERIES) (3 SERIES)

Orchestra Box		<input type="checkbox"/> \$570	<input type="checkbox"/> \$285
Orchestra		<input type="checkbox"/> \$570	<input type="checkbox"/> \$285
1st Balcony Box		<input type="checkbox"/> \$570	<input type="checkbox"/> \$285
Orchestra		<input type="checkbox"/> \$450	<input type="checkbox"/> \$225
Orchestra Parquet		<input type="checkbox"/> \$450	<input type="checkbox"/> \$225
1st Balcony		<input type="checkbox"/> \$450	<input type="checkbox"/> \$225
Rear Parquet		<input type="checkbox"/> \$330	<input type="checkbox"/> \$165
2nd Balcony Front		<input type="checkbox"/> \$330	<input type="checkbox"/> \$165
2nd Balcony Rear		<input type="checkbox"/> \$222	<input type="checkbox"/> \$111
Orchestra Front		<input type="checkbox"/> \$162	<input type="checkbox"/> \$ 81
2nd Balcony Box		<input type="checkbox"/> \$162	<input type="checkbox"/> \$ 81

Kimmel Center for the performing arts
THE KIMMEL CENTER
ACADEMY OF MUSIC
PERELMAN THEATRE



Series Amount: \$ _____

of Subscriptions: X _____

SUB-TOTAL: \$ _____

Please consider a gift to our Annual Fund: \$ _____
(Donations of \$100 or more are acknowledged in our concert programs)

Handling Fee: \$ _____ 6.00

TOTAL: \$ _____

4 Choose Your Payment:

SUBSCRIBER NAME _____

ADDRESS _____

CITY _____

STATE _____

ZIP _____

PHONE (DAY) _____

PHONE (EVENING) _____

EMAIL _____

- Enclosed is my check payable to **The Chamber Orchestra of Philadelphia**
1520 Locust Street, #500, Philadelphia PA 19102

- VISA MasterCard AMEX Discover

CREDIT CARD # _____

EXP. DATE _____

CVV CODE _____

NAME ON CARD _____

SIGNATURE _____