Office use only:
Application #

Application Form

Take A Seat!

Arden Theatre/Cultural Services

Date: _____

First Name: _____ **Last Name:** _____

Address: _____

_____

Daytime phone number: _____

Email: _____

Please circle level: **Centre Stage $1,000** **Spotlights $500** **Footlights $250**

Seat location: ***Preferred row letter and seat number (Please refer to seat map)***

Row (A – P) _____

Seat # _____

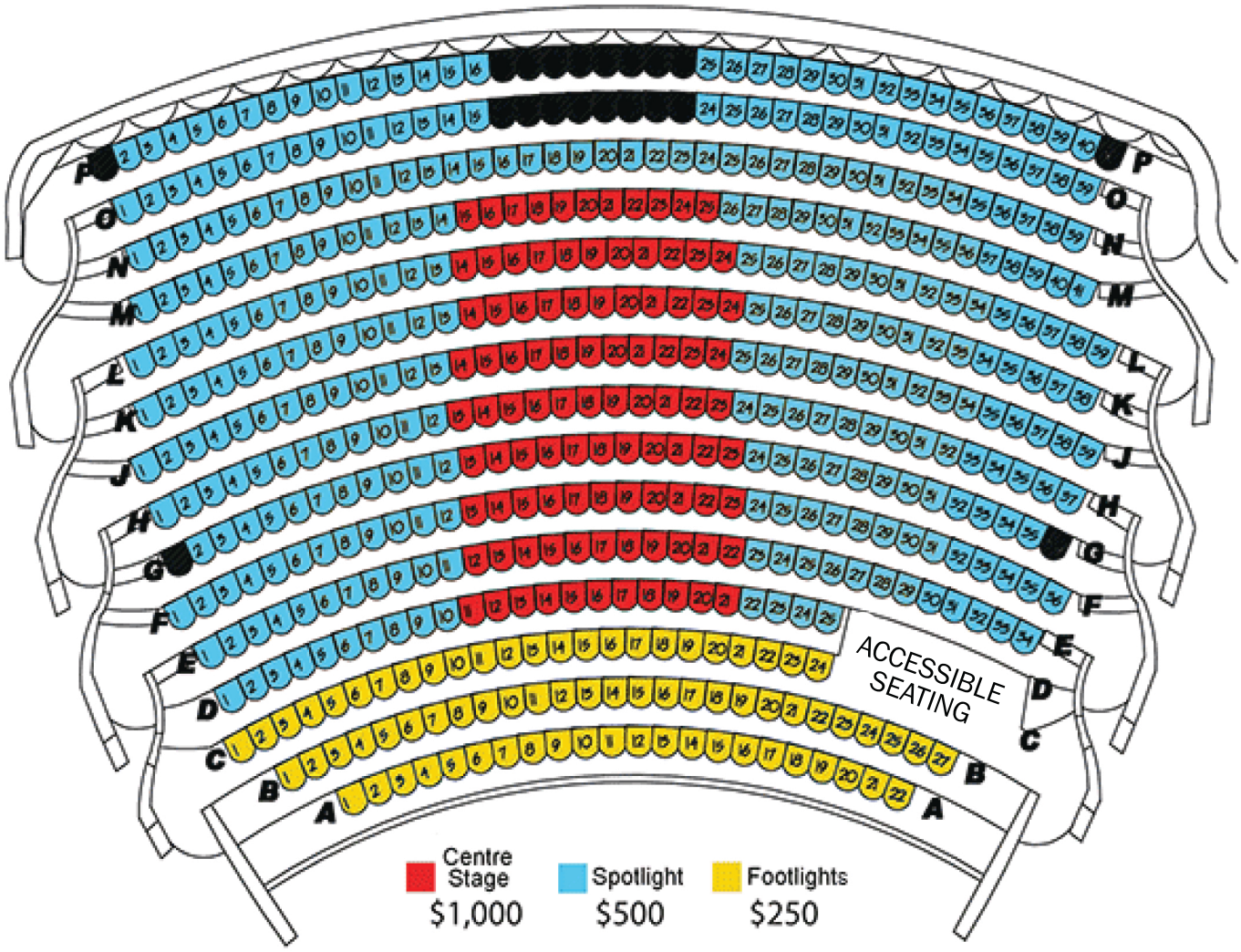
Please provide the following information upon submission of the application form:

- *Complete application form*
- *Copy of the plaque inscription with authorization signature*
- *Payment:*
  If paying by cheque please make the cheque payable to the City of St. Albert.

  Credit Card information:

  Card number: _____

  Expiry Date: _____ Signature: _____


ACCESSIBLE SEATING
Centre Stage
$1,000
Spotlight
$500
Footlights
$250