



Founder Charlotte Rogers Smith, 1946

Choral Society of the Hamptons  
P.O. Box 1031  
Bridgehampton, NY 11932  
Tel. 631-204-9402

Please print this form.  
Fill it out and send it  
with your payment.

**BILLING INFORMATION**

Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

I would like to receive periodic updates and information from The Choral Society.

Yes

No

**TICKET INFORMATION**

Adults \$35.00 Qty: \_\_\_\_\_ = \$ \_\_\_\_\_  
Youths (under 18) \$20.00 Qty: \_\_\_\_\_ = \$ \_\_\_\_\_  
(+suggested contribution of \$10) \_\_\_\_\_ = \$ \_\_\_\_\_  
  
Total = \$ \_\_\_\_\_

**DONATION INFORMATION**

If you would like to make a donation, please fill out the following information.

- Angel: \$5,000
- Underwriter: \$500
- Friend of the Chorus: \$25
- Champion: \$2,500
- Benefactor: \$250
- Other amount \$ \_\_\_\_\_
- Patron: \$1,000
- Sponsor: \$100

**SHIPPING INFORMATION**

If other than the address above. Tickets will be shipped free of charge.  
Tickets purchased within one week of the performance will be held at the door.

Ship to my billing address (above).

Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_  
Zip Code \_\_\_\_\_

**PAYMENT METHOD**

There are two ways to complete payment:

**1 Check or Money Order**

Please print this form, complete and send it with your payment. You will receive a confirmation.

**2 Credit Card** Please fill out the information below:

Card Type \_\_\_\_\_  
Card # \_\_\_\_\_  
Exp. Date \_\_\_\_\_  
Month \_\_\_\_\_ Year \_\_\_\_\_  
Card Verification # \_\_\_\_\_  
Name on Card \_\_\_\_\_