



**Williamsport Symphony Orchestra** www.williamsportsymphony.com  
 220 W 4th Street, 3rd Floor • Williamsport, PA 17701-6102 • 570-322-0227 • fax 570-322-7614

**Single Tickets for 2007-2008 Season**

Use this form to mail or fax your order. Print directly from your web browser window or save to disk and print from Adobe Reader. Print this form, fill out, sign, then mail or fax with your payment (fax orders must be paid with credit card) to: Community Arts Center, 220 W 4th Street, Williamsport, PA 17701-6102 fax: (570) 327-7662.

**Personal Information** PLEASE PRINT LEGIBLY

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Home Phone ( ) - - Business Phone ( ) - -

e-mail address \_\_\_\_\_

**Ticket Selection**

I would like to order the following ticket(s) for WSO's 2007-2008 **Season of the Maestros** Concert Season:

**2007**

**Oct. 9: Opening Night** Quantity \_\_\_\_\_ (multiplied by Ticket Price) = \$ \_\_\_\_\_

Balcony \$10.00     III Side & Rear Orchestra \$32.50

II Front & Side Orchestra & Loge \$38.50     I Sterling Circle \$45.00

**Dec. 11: Holiday Concert** Quantity \_\_\_\_\_ (multiplied by Ticket Price) = \$ \_\_\_\_\_

Balcony \$10.00     III Side & Rear Orchestra \$32.50

II Front & Side Orchestra & Loge \$38.50     I Sterling Circle \$45.00

**2008**

**Feb. 12: Winter Concert** Quantity \_\_\_\_\_ (multiplied by Ticket Price) = \$ \_\_\_\_\_

Balcony \$10.00     III Side & Rear Orchestra \$32.50

II Front & Side Orchestra & Loge \$38.50     I Sterling Circle \$45.00

**Mar. 18: Spring Concert** Quantity \_\_\_\_\_ (multiplied by Ticket Price) = \$ \_\_\_\_\_

Balcony \$10.00     III Side & Rear Orchestra \$32.50

II Front & Side Orchestra & Loge \$38.50     I Sterling Circle \$45.00

**May 13: A Night In Russia** Quantity \_\_\_\_\_ (multiplied by Ticket Price) = \$ \_\_\_\_\_

Balcony \$10.00     III Side & Rear Orchestra \$32.50

II Front & Side Orchestra & Loge \$38.50     I Sterling Circle \$45.00

Processing fee \$ 4.00

Tax-deductible donation (opt.) \$

**TOTAL** \$

Each ticket includes a \$0.50 Municipal/Service Fee.

**Payment Method (credit cards only with fax orders)**

Check enclosed, payable to Community Arts Center     MasterCard     VISA     Other \_\_\_\_\_

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

**Signature** \_\_\_\_\_

(SIGN ABOVE LINE AND PRINT NAME HERE:  
**Tickets must be picked up at the Community Arts Center Box Office by 5:00 pm day of concert.**