

# Purchaser Info

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Referred by \_\_\_\_\_

## Recipient (if Gift Pass)

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

## Payment

Check (payable to **Commonweal Theatre**)  
 CC # \_\_\_\_\_  
Exp Date MM/YY Security Code \_\_\_\_\_

## Total Your Order

Number of Passes \_\_\_\_\_ X **\$115** = \$ \_\_\_\_\_

Help us celebrate our 32<sup>ND</sup> Season with your generous, tax-deductible additional gift of \$32 (or more!):

*Additional Gift* + \$ \_\_\_\_\_

**Grand Total** = \$ \_\_\_\_\_



Upgrade to the MDC club for all the perks of a Season Pass and more! We'll call you!

## RETURN FORM & PAYMENT TO:

PO Box 15 • Lanesboro, MN • 55949  
(800)657-7025 • [CommonwealTheatre.org](http://CommonwealTheatre.org)

## OFFICE USE

NEW    RENEW    CC    CHK# \_\_\_\_\_

Received by _____	Date _____
Entered BO _____	Date _____
Entered XL _____	Date _____
Distributed _____	Date _____
Deposited _____	Date _____