



CONCERT DATES & GUEST ARTISTS

SAT FEB 4 @ 7:30 PM **or** SUN FEB 5 @ 3 PM
"Mosaic for Heaven's Floor"
MICHAEL SHEPPARD *piano*

SUN MAR 19 @ 3 PM
"Breaking the Glass"
DAVID KIM *violin*

SUN APR 23 @ 3 PM
"Olympians & Titans"
NATHAN CHAN *cello*

TICKET SUBSCRIPTION INFORMATION

- Price is per seat for the season. Order online (www.olyso.org) or by mailing in a completed order form (reverse side).
- Subscription includes reserved seating and 10% discount on individual ticket pricing.
- **Current subscriber seats held until Oct 31. Deadline to subscribe is Nov 16. Tickets will be mailed in December.**



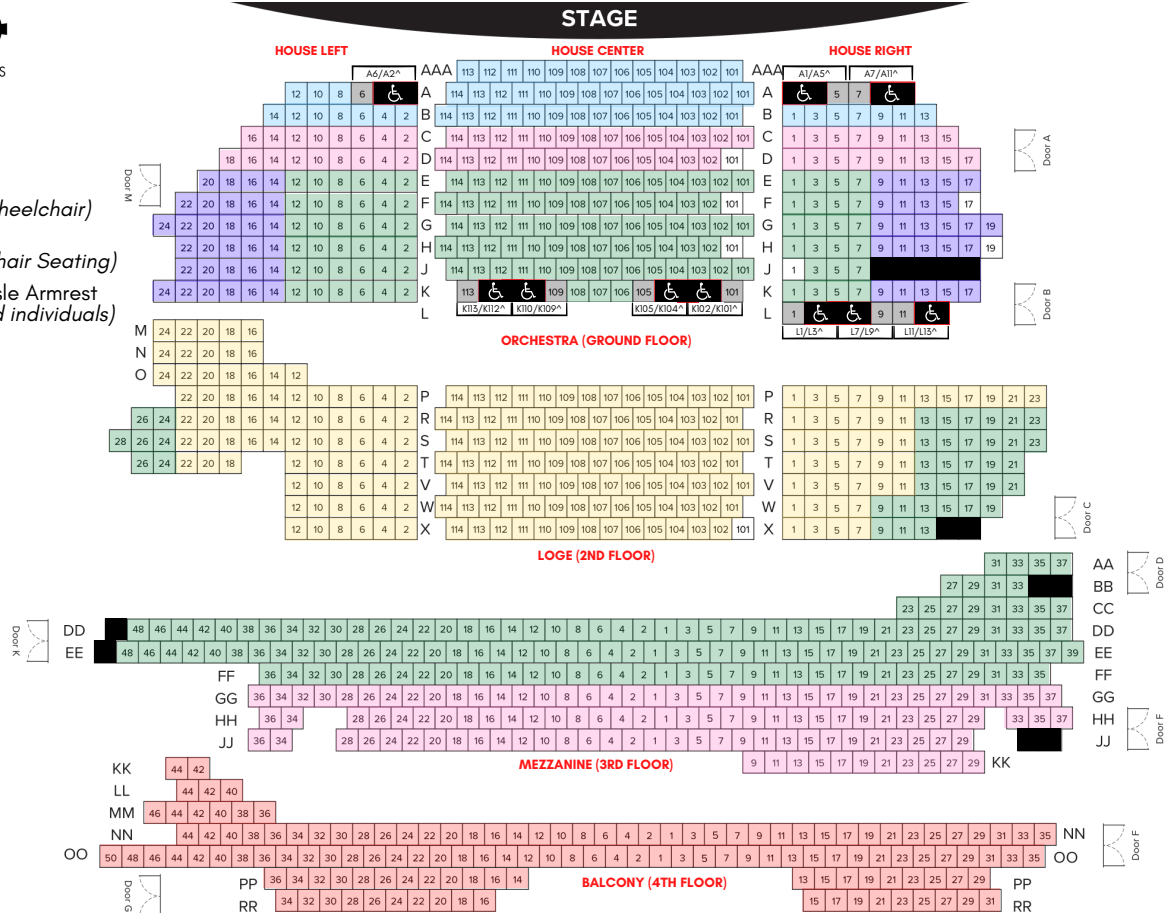
WHEELCHAIR & ADA SEATING ^

- Wheelchair Seating (*no theater seat - space for wheelchair*)
- Wheelchair Companion Seat (*to be purchased with Wheelchair Seating*)
- ADA Seating - Swing Away Aisle Armrest (*reserved for mobility-impaired individuals*)

PRICE ZONES *

- A - \$187.50
- B - \$160.50
- C - \$133.50
- D - \$106.50
- E - \$79.50
- F - \$52.50

*Not all zones are available on each level of the house



- Programs/guest artists subject to change. Subscription prices include the Washington Center service fee (\$4.00/seat/concert).
- All patrons, volunteers, staff, and performers must abide by the Washington Center's COVID-19 guidelines. Please visit [washingtoncenter.org/events-tickets/faq](http://www.washingtoncenter.org/events-tickets/faq) for the current information to make an informed decision about your purchase.
- The Washington Center for the Performing Arts is the Olympia Symphony's only authorized ticket seller. Make sure you purchase your tickets directly through their website (<https://www.washingtoncenter.org>). Neither the Washington Center nor the Olympia Symphony are able to honor fraudulent tickets for our ticketed events.
- While ticket purchases are considered final and refunds will not be issued, we want you to feel confident about your purchase. If a concert has to be rescheduled, your ticket will automatically transfer to the new date. If you cannot make the rescheduled date, you may exchange your ticket in advance for another OSO performance during the same season (subject to availability). There is a Washington Center fee per ticket exchanged. If a concert is cancelled altogether, we will offer a full ticket refund minus the service fee.

2022-2023 OSO SEASON SUBSCRIPTION ORDER FORM

First Name/Last Name _____

Email Address _____ Phone # _____

Mailing Address _____

City/State/Zip Code _____

TICKET ORDER

Subscriber Type:

New Subscriber Renewing Subscriber - *keep existing seats* Renewing Subscriber - *change seats*

Existing/Preferred Row/Seat Number(s) - optional: _____

Pick your Package: **Sat Feb 4 @ 7:30 PM** | Sun Mar 19 @ 3 PM | Sun Apr 23 @ 3 PM *Saturday Night Date in Feb!*

Sun Feb 5 @ 3 PM | Sun Mar 19 @ 3 PM | Sun Apr 23 @ 3 PM *All Sunday Matinees!*

Price Zone - Select/Indicate # of Seats/Total \$:

Zone A - \$187.50/seat x # of Seats _____ Total \$ _____ Zone D - \$106.50/seat x # of Seats _____ Total \$ _____

Zone B - \$160.50/seat x # of Seats _____ Total \$ _____ Zone E - \$79.50/seat x # of Seats _____ Total \$ _____

Zone C - \$133.50/seat x # of Seats _____ Total \$ _____ Zone F - \$52.50/seat x # of Seats _____ Total \$ _____

Floor Level:

Orchestra (ground floor) - *Available for Price Zones B, C, D, E*

Loge (2nd floor; stair access only) - *Available for Price Zones A, B*

Mezzanine (3rd floor; stairs/elevator access) - *Available for Price Zones B, C*

Balcony (4th floor; stairs/elevator access) - *Available for Price Zone F*

House Section:

House Left House Center House Right

Accessibility:

Wheelchair/Walker Access Assistive Listening Device Official Service Animal

Please provide additional detail on the specific kind(s) of accommodation(s) you/your party requires below. We will work directly with the Washington Center staff to ensure you have the most supportive experience possible.

Support LIVE LOCAL MUSIC! Make an additional financial gift to directly fund this season's concerts.

YES! I would like to donate \$ _____ Please contact me about setting up a monthly pledge

Please indicate how you would like your name listed on our donor list _____

I would like my donation to remain anonymous

PAYMENT INFORMATION

Payment Amount: Ticket Total \$ _____ + Donation Total \$ _____ = Total Payment Amount \$ _____

Payment Method - Select One: Credit Card Check (# _____) (*make payable to the Olympia Symphony*)

Name (as it appears on card) _____

Card Number _____ **Expiration Date** _____ **3 Digit Code** _____

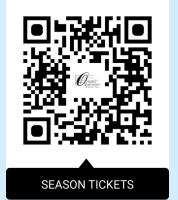
Cardholder Signature _____ **Date** _____

Mail Completed Form/Payment to: Olympia Symphony 3400 Capitol Blvd SE #203 Olympia WA 98501

Thank you for your purchase and see you at the Symphony!

Skip the Form - Order Online!

Scan the QR code
to buy tickets
or visit



www.olyso.org

SEASON TICKETS