# DOBAMA THFATRE

## 2024/25 MEMBERSHIP ORDER FORM

Name(s):

□ New Member

\_\_\_\_ □ Renewing Member \*

\*Renewing members do not have to fill out address / phone / email unless it has changed

Address:		City:
State:	Zip Code:	Phone: ()
Email:		

#### Membership \$180

6 Full-Flex Ticket Vouchers 2 Drink/Concession Tickets **Special Gift & Invitations** 

#### What are Full-Flex Vouchers?

Vouchers can be used however you like throughout the 24/25 season

Young Professional (YP) Membership (under 40) \$150

- # of Memberships x \$180 = \$\_\_\_\_\_ # of YP Memberships x \$150 =Additional Donation \$ (Premiere Club levels start at \$150)
  - **Total**<sup>^</sup> = \$

^if paying by credit card, you will be charged a \$4.98 processing fee per Membership

For more information on Membership & Premiere Club Benefits, please visit dobama.org

### PAYMENT

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card:

BY CHECK: Please make checks payable to Dobama Theatre and mail to: 2340 Lee Road, Cleveland Heights, OH 44118

Questions or to order by phone: call the Box Office at 216.932.3396