



2024-2025 Season Ticket New-Order Form

THIS FORM IS TO BE USED FOR PURCHASING SEATS BY PATRONS WHO DID NOT ORDER 2023-2024 SEASON TICKETS.

Forms may be delivered or mailed to the **ECA Box Office: 410 Fourth Avenue North, Edmonds, WA 98020.** The best season-ticket seating will be available to those who order prior to the single-concert ticket sale, which begins **August 1.**

PLEASE DO NOT INCLUDE DONATIONS WITH YOUR TICKET ORDER.
YOU CAN DONATE ONLINE AT www.cascadesymphony.org
OR MAIL YOUR GIFT DIRECTLY TO CSO AT PO Box 876, Edmonds, WA 98020.

2024-2025 SEASON TICKETS				
SUBSCRIPTION CONCERTS (reserved seats)				
October 28, 2024	December 15 & 16, 2024	January 13, 2025	March 10, 2025	May 5, 2025
PRE-CONCERT LECTURES, 6:30 PM – CONCERTS, 7:30 PM				
Subscription Concerts	Price	Quantity	Subtotals	
<i>Five Concerts</i>		<i>Season Tickets</i>		
Adults	\$125		\$	
Seniors (60+)	\$115		\$	
Please check preferred date for Holiday Concert: <input type="checkbox"/> Sunday, December 15 <input type="checkbox"/> Monday, December 16				

Tickets for the **Children’s Concert** (February 8, 2025) and **Chamber Music Concert** (date TBD) can be ordered directly from the ECA Box office by phone (425-275-9595) or online (www.edmondscenterforthearts.org/about/tickets) and click on *Partner Events*)

Please print clearly the following information:
Contact information is for ECA and CSO use only and will not be shared with outside organizations.
Tickets will be held at the Box Office if the delivery options to the right are left blank.

Name _____
Address _____
City/State/Zip _____
E-mail _____ Phone _____

Ticket Subtotal	\$
<i>Ticket Delivery—please indicate preference</i>	
E-Ticket (free)	
Will Call (free)	
US Mail (add \$2.50)	\$
GRAND TOTAL	\$

PLEASE CHOOSE ANY PREFERENCES YOU MAY HAVE FOR THE FOLLOWING SEAT LOCATIONS. IF YOU HAVE NO SEATING PREFERENCES, SIMPLY LEAVE THE OPTIONS BLANK.

Main Floor Balcony Aisle Interior
 Forward Midway Back Center Section Side Section

The facility has limited ADA special needs seating available. By checking the box on this line, you confirm your need for this accommodation.

PAYMENT INFORMATION	
<input type="checkbox"/> Check payable to the EDMONDS CENTER FOR THE ARTS	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
Card Number _____	Expiration _____
Signature _____	CVV Code _____