

1350 E Sunrise Blvd · Fort Lauderdale, FL 33304 · 954 524-0805 · www.goldcoastjazz.org · gcjudy@bellsouth.net

NAME		UBSCRIPTION (
ADDRESS				
CITY			STATEZIP	
EMAIL ADDRESS				
<u>Here is my order for 2014-20</u>	<u>15:</u>			
Full Subscription (7 concerts)	Price	Number of Subscriptions	Handling Fee (\$10.00 per subscription)	Total
Per Subscription Membership Rate	\$245.00 \$230.00		\$ \$	\$ \$
Jazz Trio Subscription (3 concerts)	Price	Number of Subscriptions	Handling Fee (\$10.00 per subscription)	Total
Per Subscription	\$110.00		\$	\$
() I've checked the boxes to □ 11/12 Bill All □ 12/10 Bill Ch □ 1/14 Janis S □ 2/13 (Fri) Arturo □ 3/13 (Fri) Michae □ 4/8 Dr. Lo □ 5/13 Mike I	pick the formal property of the following th	Sollowing 3 Jazz band Sollowing 5 Jazz band	orida Jazz Orchestra Society Band best available seats.	c Club
Please mail ticket to the addro	ess below	(If different	from one listed above)	
Address	(Please r	Apt. #	City State uests on reverse side)	Zip
My total order is for \$		ld Coast Jazz Soo MasterCard	ciety () American Express	

Card Number

Exp. Date

Signature

Name as it appears on the Credit Card