

# GOLD COAST SOCIETY

1350 E Sunrise Blvd · Fort Lauderdale, FL 33304 · 954-524-0805 · [www.goldcoastjazz.org](http://www.goldcoastjazz.org)

## 2021-2022 MEMBERSHIP – SUBSCRIPTION ORDER FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Membership Levels (See the enclosed flyer for all the membership privileges)

- \_\_\_ \$60 Solo Jazz Club Membership (Discounts for One Person in same Household)
- \_\_\_ \$100 Patron Jazz Club Membership (Discounts for Two Persons in same Household)
- \_\_\_ \$250 Silver Jazz Club Membership
- \_\_\_ \$500 Gold Jazz Club Membership
- \_\_\_ \$1,000 Platinum Jazz Club Membership
- \_\_\_ \$2,500 Diamond Circle Membership

**Please note: Solo membership entitles you to (1) Full or (1) Trio subscription at the member rate. Patron entitles you to (2) Full or (2) Trio Subscriptions at the member rate.**

**Here is my Subscription Order including the number of subscriptions I want to receive.**

Please include actual number of subscriptions requested (1, 2, 3, etc.)

\$280.00 per subscription X # \_\_\_\_\_ of Full Subscriptions - Member rate (includes handling fees)

\$315.00 per subscription X # \_\_\_\_\_ of Full Subscriptions - Non-Member rate (includes handling fees)

\$129.00 per subscription X # \_\_\_\_\_ of Jazz Trio subscriptions - Member rate (includes handling fees)

\$150.00 per subscription X # \_\_\_\_\_ of Jazz Trio subscriptions - Non-Member rate (includes handling fees)

( ) My Jazz Trio order is for the following *three* (3) concerts:

- |  |  |
|--|--|
| <input type="checkbox"/> 11/10 South FL Jazz Orchestra | <input type="checkbox"/> 2/9 Chuchito Valdes         |
| <input type="checkbox"/> 12/8 Bria Skonberg Quartet    | <input type="checkbox"/> 3/9 Tony DeSare             |
| <input type="checkbox"/> 1/12 Shelly Berg Trio         | <input type="checkbox"/> 4/13 Dirty Dozen Brass Band |
| <input type="checkbox"/> 1/25 Kenny Barron Trio        |  |

**New Subscribers are assigned the best available seats.**

**Special seating for those with mobility problems or disabilities requiring special assistance is available.**

My total order including Membership Level + Subscription(s) is \$ \_\_\_\_\_.

( ) **Enclose check to Gold Coast Jazz Society. Charge to:** ( ) Visa ( ) MasterCard ( ) American Express

\_\_\_\_\_  
Name as it appears on the Credit Card

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Signature