

Producer - \$10,000

- > **10 tickets** to the pre-show cocktail dinner, opening night performance of *Bull Durham*, and post-show cast party
- > Listing as Season Opening Celebration sponsor in ***Bull Durham* program**
- > Listing as Season Opening Celebration sponsor on **Alliance Theatre website**
- > Complimentary **valet parking** at the Woodruff Arts Center and post-show cast party
- > **2 season tickets** to the Alliance or Hertz Stage Series for the 2014/15 Season

Director - \$5,000

- > **6 tickets** to the pre-show cocktail dinner, opening night performance of *Bull Durham*, and post-show cast party
- > Listing as Season Opening Celebration sponsor in ***Bull Durham* program**
- > Listing as Season Opening Celebration sponsor on **Alliance Theatre website**
- > Complimentary **valet parking** at the Woodruff Arts Center and post-show cast party
- > **4 tickets** to an Alliance Theatre production in the 2014/15 Season

Principal - \$2,500

- > **4 tickets** to the pre-show cocktail dinner, opening night performance of *Bull Durham*, and post-show cast party
- > Listing as Season Opening Celebration sponsor in ***Bull Durham* program**
- > Listing as Season Opening Celebration sponsor on **Alliance Theatre website**
- > Complimentary **valet parking** at the Woodruff Arts Center and post-show cast party
- > **2 tickets** to an Alliance Theatre production in the 2014/15 Season

Ensemble - \$1,000

- > **2 tickets** to the pre-show cocktail dinner, opening night performance of *Bull Durham*, and post-show cast party
- > Listing as Season Opening Celebration sponsor in ***Bull Durham* program**
- > Listing as Season Opening Celebration sponsor on **Alliance Theatre website**
- > Complimentary **valet parking** at the Woodruff Arts Center and post-show cast party

alliancetheatre.org/celebration

Name as you would like to appear in the program: _____

Address: _____

Phone: _____ Home / Work / Cell Email: _____

I have enclosed my check payable to the Alliance Theatre for a contribution of \$ _____

Please charge my credit card for a contribution of \$ _____

Full Card Number: _____ Expiration Date: _____

Type: Visa / AmEx / MasterCard / Discover

Signature: _____ ☐ Please send me a bill.