Beaufort County Concert Association Subscription Form 2025/26 Season

(please print cl	early)							
Name								
Address								
City/State/Zip_					_			
Phone								
E-mail					_			
(Please provide	valid E-	mail address so we ca	an reach you.)					
Main Level	Subscr	<u>iptions</u>						
Subscription	n = 4 sh	nows/tickets						
Friend	\$125	(1 season ticket)	\$					
Patron	\$275	(2 season tickets)	\$					
Sponsor	\$425	(2 season tickets)	\$					
Benefactor	\$625	(2 season tickets)	\$					
Promoter	\$1000	(2 season tickets)	\$					
Underwriter	\$2500	(2 season tickets)	\$					
		n and above will be li			ppear a	bove if re	eceived by	8/1/24)
Balcony Sub (Balcony acces Balcony \$100	oscripti s REQUI per Sub	RES using steps)	#	= \$				
		for Youth Programs			\$			
Make check payable to BCCA.			Total: \$					
Mail this form	and your	check to: BCCA, PO I	Box 1024, Wash	ington NC	27889.			

Tickets will be mailed several weeks before the first concert.