



Season Tickets Order 2019-2020 Season

Print and mail with your check or credit card information to:

Highlands Cashiers Players
P.O. Box 1416
Highlands, NC 28741

___ Check

___ Credit card (VISA or Mastercard) _____

Exp. date _____ V-code (required) _____ (3 digit code or 4 digit code for Amex)

New HCP Subscriber? _____ yes _____ no

Name: _____

Credit Card Mailing Address: _____

Phone(s): _____

E-Mail: _____

Number of Season Tickets: _____ x \$125.00 = \$ _____

I'd like to make a tax deductible contribution: \$ _____

TOTAL: \$ _____

HCP is a not-for-profit 501(c)(3) organization.

Contributions are tax deductible to the extent allowed by law.