

Fixed Subscriptions Exchange Form

FAX

to 626.628.0385
(with a copy of your tickets torn in half)

EMAIL

to boxoffice@PasadenaPlayhouse.org
(with a scan of your tickets torn in half)

MAIL

to 39 S. El Molino Ave., Pasadena, CA 91101
(with your tickets enclosed)

your information

Name: _____

Phone: _____

Email: _____

performance request

The Box Office will assign you the best available seats in your section.

1.

1ST CHOICE

Show Title: _____

Date: _____ **Time:** _____

2.

2ND CHOICE

Show Title: _____

Date: _____ **Time:** _____

3.

3RD CHOICE

Show Title: _____

Date: _____ **Time:** _____

Once your new tickets are booked, they will be placed at Will Call under your name to pick up the day of the show. You will be contacted to confirm your tickets. If you have any further questions, please contact the Box Office at 626.356.7529.