



# 2024 BACKSTAGERS

Join us backstage where the “Muni Magic” happens!

**Please complete all information on this form.**

**Backstager Name:** \_\_\_\_\_

*(Please print the Backstager Name exactly as you would like it to appear in the Muni programs. Memberships received after May 1, 2024, will be listed in the first possible show program.)*

**Address:** \_\_\_\_\_

**City / State / Zip:** \_\_\_\_\_

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

**Contributions** to the Muni Backstagers are tax-deductible to the extent allowed by law.

- I wish to waive membership benefits so as to deduct the full value of my contribution to the extent allowed by law. \_\_\_\_\_ *(Please Initial)*

<b>BACKSTAGERS MEMBERSHIP LEVELS &amp; BENEFITS</b> - Check the box to indicate your desired membership level below.					
	Name in Program	Pre-season Preview Night for 2	Refreshment Coupons Drink/Popcorn	Subscriptions	Premium Parking Pass
<input type="checkbox"/> <b>FEATURED PERFORMER</b> \$50+	X	X			
<input type="checkbox"/> <b>SUPPORTING PERFORMER</b> \$100+	X	X	4 Coupons		
<input type="checkbox"/> <b>LEAD ACTOR</b> \$250+	X	X	4 Coupons	2 Subscriptions	
<input type="checkbox"/> <b>CONDUCTOR</b> \$350+	X	X	8 Coupons	2 Subscriptions	X
<input type="checkbox"/> <b>DIRECTOR</b> \$500+	X	X	8 Coupons	3 Subscriptions	X
<input type="checkbox"/> <b>PRODUCERS CIRCLE</b> \$1000+	X	X	8 Coupons	4 Subscriptions	X
<input type="checkbox"/> <b>BENEFACOR ROUNDTABLE</b> \$1500+ <i>(includes a special Premier Muni gift)</i>	X	X	8 Coupons	4 Subscriptions	X
<b>*Each Subscription</b> entitles attendance for 4 performances in the 2024 Muni Season					

**SEASON SUBSCRIPTION\*** - Reserve same seat, same night for each show. Please check the box below to indicate your desired seat & night. **There are no handling fees or ticket exchange fees for Backstagers!**

\* Additional subscription details provided on our website – [www.themuni.org/buy-tickets](http://www.themuni.org/buy-tickets)

**SEASON SUBSCRIPTION – SELECT YOUR NIGHT AND SEAT**

	1 <sup>st</sup> Friday	1 <sup>st</sup> Saturday	1 <sup>st</sup> Sunday	Wednesday	Thursday	2 <sup>nd</sup> Friday	2 <sup>nd</sup> Saturday
Select your preferred night	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Select your preferred row <i>(A-R)</i>							
Select your preferred seat(s) <i>(Audience right, audience left or center)</i>							

For questions, please send an email to [MuniBackstagers@gmail.com](mailto:MuniBackstagers@gmail.com) and the Backstagers Chair will reach out to you.  
**Please make your check payable to “The Muni” and mail to Springfield Muni Opera, P.O. Box 2255, Springfield, IL 62705**  
**PLEASE RETURN THIS FORM BY MARCH 31, 2024**