



California Conservatory Theatre of San Leandro

999 E. 14th Street, P O Box 894, San Leandro, CA 94577
 (510) 632-8850, cctofsl@yahoo.com

Dear future CCT Subscriber. This is your 2007-2008 Season Ticket order form.

Please fill out the attached form and return it to the CCT box office. We've got **five** great shows lined up and look forward to you joining us for an exciting season.

2007-2008 Performance Schedule

Snappy Musical Comedy

PETE 'N' KEELY

September 13 – October 7, 2007

Hilarious Holiday Fun

A TUNA CHRISTMAS

November 15 – December 16, 2007

Touching Southern Charmer

STEEL MAGNOLIAS

January 31 – February 24, 2008

Spine-Chilling Mystery

DIAL 'M' FOR MURDER

April 3 – April 27, 2008

Heartwarming Comedy

GRACE AND GLORIE

June 5 – June 29, 2008

	THU 8PM	FRI 8PM	SAT 8PM	SUN MAT 2PM	THU 8PM	FRI 8PM	SAT MAT 2PM	SAT 8PM	SUN MAT 2PM	FRI 8PM	SAT MAT 2PM	SAT 8PM	SUN MAT 2PM	FRI 8PM	SAT MAT 2PM	SAT 8PM	SUN MAT 2PM
SERIES NUMBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
PETE 'N' KEELY	SEP 13	14	15	16	20	21	22	22	23	28	29	29	30	OCT 5	6	6	7
A TUNA CHRISTMAS	NOV 15	16	17	18	29	30	DEC 1	1	2	7	8	8	9	14	15	15	16
STEEL MAGNOLIAS	JAN 31	FEB 1	2	3	7	8	9	9	10	15	16	16	17	22	23	23	24
DIAL 'M' FOR MURDER	APR 3	4	5	6	10	11	12	12	13	18	19	19	20	25	26	26	27
GRACE AND GLORIE	JUN 5	6	7	8	12	13	14	14	15	20	21	21	22	27	28	28	29

PRICES (5 SHOWS) SEASON*

Adult.....\$99.00

Senior/Student.....\$90.00

*A 10% savings over single ticket prices.

EXCHANGE POLICY:

Tickets may be exchanged for a different date of the same production providing you notify the box office no later than 24 hours prior to the performance for which the tickets are issued. There are no refunds.



California Conservatory Theatre of San Leandro

Please fill in the form below and return along with your check to:

**CALIFORNIA CONSERVATORY THEATRE, PO BOX 894, SAN LEANDRO, CA
94577**

or call us at 510-632-8850

Please send me: _____ Adult Tickets @ \$99.00

_____ Senior/Student Tickets @ \$90.00

FOR SERIES # _____

Please accept my tax-deductible contribution of \$ _____

I have enclosed my check for \$ _____, or

Please charge my VISA or MASTERCARD # _____

Exp Date _____

Name _____

Address _____

City/State/Zip _____

Phone _____