RENEW BY AUGUST 1ST FOR SAME SEATING!

Get Your Ritz Theatre Co. 2026 Subscription Now!

You Get A 29% Discount Off Single Ticket Price!!

"Premium" - $180 - 7 Shows; "Classic" - $155 - 6 Shows

"FlexPass" - $155 - 6 Vouchers, NEW Online Exchange!

Choose Your Package!

STEP ONE: TELL US ABOUT YOU

Name: _____

Address: _____

City: _____

State: _____ **Zip:** _____

Phone: _____

Email (Required): _____

_____

Renewing Subscriber?: ___ Yes ___ No

Please Alert Us if You Need ADA Seating or Have Other Special Needs.

___ Assistive Listening Device ___ Wheelchair

___ Vision Difficulty

Other: _____

_____

STEP TWO: CHOOSE YOUR SHOW SERIES & LETTER BELOW: _____

*** Presented in Black Box Format, General Admission Seating**

2026 Mainstage & Black Box Productions

SERIES & LETTER (Please Circle Letter Below)		Company	She Kills Monsters	Porgy & Bess	Grease	La Gringa*	Trolls & Men	Joseph & Dreamcoat
Fridays 8:00 PM	A	9-Jan	6-Mar	1-May	26-Jun	4-Sep	9-Oct	4-Dec
	D	16-Jan	13-Mar	8-May	3-Jul	11-Sep	16-Oct	11-Dec
	G	23-Jan	20-Mar	15-May	10-Jul	18-Sep	23-Oct	18-Dec
	K	30-Jan	27-Mar	22-May	17-Jul	Your Choice	30-Oct	Your Choice
Open Caption! Saturdays 3:00 PM	J	17-Jan	14-Mar	9-May	4-Jul	12-Sep	17-Oct	12-Dec
Saturdays 8:00 PM	B	10-Jan	7-Mar	2-May	27-Jun	5-Sep	10-Oct	5-Dec
	E	17-Jan	14-Mar	9-May	4-Jul	12-Sep	17-Oct	12-Dec
	H	24-Jan	21-Mar	16-May	11-Jul	19-Sep	24-Oct	19-Dec
	L	31-Jan	28-Mar	23-May	18-Jul	Your Choice	31-Oct	Your Choice
Sundays 2:00 PM	C	11-Jan	8-Mar	3-May	28-Jun	6-Sep	11-Oct	6-Dec
	F	18-Jan	15-Mar	10-May	5-Jul	13-Sep	18-Oct	13-Dec
	I	25-Jan	22-Mar	17-May	12-Jul	20-Sep	25-Oct	20-Dec
	M	1-Feb	29-Mar	24-May	19-Jul	Your Choice	1-Nov	Your Choice
Wednesdays 7:30 PM	Q	21-Jan	18-Mar	13-May	8-Jul	16-Sep	21-Oct	16-Dec
	R	28-Jan	25-Mar	20-May	15-Jul	Your Choice	28-Oct	Your Choice

STEP THREE: PROVIDE PAYMENT INFORMATION

Call Us About A Monthly Payment Plan!

***Each Subscription Package Price Already Includes $5 Ticket Service Fee.**

_____ **Premium Subscription Package**.....Price Per Person $ 180.00 (x) Quantity: _____ (=) _____

_____ **Classic Subscription Package**.....Price Per Person $ 155.00 (x) Quantity: _____ (=) _____

_____ **FlexPass Subscription Package**.....Price Per Person $ 155.00 (x) Quantity: _____ (=) _____

My Tax Deductible Donation $ _____

GRAND TOTAL: _____

_____ **Enclosed** is my check made payable to ***Ritz Theatre Co*** (preferred)

OR Please Charge My: _____ **Visa** _____ **MasterCard** _____ **Discover** _____ **Amex**

Card Number: _____ Exp Date: _____ Security Code: _____ (3 or 4 digits on back)

Signature: _____ Billing Zip Code: _____