**26th Year**  
**Advance Order Form**

*The Embassy (Concert) Series™*  
Jerome Barry, Director/Founder  
**2019– 2020 Spring Season**

Direct line: (202) 625-2361  
or send to Embassy Series, PO Box 9871, Washington, DC 20016  
Order also at Concerts@embassyseries.org- www.embassyseries.org  
(Check out our Facebook page: www.facebook.com/embassyseries- please click “like”)

<table>
<thead>
<tr>
<th>Concert</th>
<th>Date</th>
<th>Location</th>
<th>Tickets</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ribeiro/Barrantes, pianists</td>
<td>3/4/2020</td>
<td>Portuguese Ambassador’s Residence</td>
<td>$160</td>
<td>$_____limited ticket</td>
</tr>
<tr>
<td>Annelien Lenaerts, harp</td>
<td>3/23/2020</td>
<td>Belgian Ambassador’s Residence</td>
<td>$225</td>
<td>$_____limited tickets</td>
</tr>
<tr>
<td>Piano Quintet &amp; Quartet</td>
<td>3/26/2020</td>
<td>Embassy of the Czech Republic</td>
<td>$125</td>
<td>$_____limited tickets</td>
</tr>
<tr>
<td>Alexandra Nowakowski, soprano</td>
<td>4/7/2020</td>
<td>Polish Ambassador’s Residence</td>
<td>$160</td>
<td>$_____limited tickets</td>
</tr>
<tr>
<td>Bratislava Boys’ Choir</td>
<td>4/22/2020</td>
<td>Embassy of Slovakia</td>
<td>$80</td>
<td>$_____limited tickets</td>
</tr>
<tr>
<td>Bálaez Fülei, piano</td>
<td>5/22/2020</td>
<td>Embassy of Hungary</td>
<td>$125</td>
<td>$_____limited tickets</td>
</tr>
</tbody>
</table>

Total= $_____

MORE CONCERTS TO FOLLOW- see www.embassyseries.org

A delectable artists’ reception follows each concert.  
☼ buffet or full service reception  V- Valet Parking

**ARTISTS AND PROGRAMS SUBJECT TO CHANGE.** **UPDATES FOR ADDED-ON CONCERTS WILL BE MAILED OR E-MAILED TO YOU.**

Subscriptions: (Discounts) 5 or more different concerts/person (subtract $20 from total)  

**Only subscribers (6 different concerts per person or more) and donors above $500 have the option to exchange tickets as a special benefit, subject to availability.** (May not be carried over to following season)- $5 charge/ticket for exchange fee.

-Discount - $_____

Subtotal= $_____  
Handling Charge= $2.50/ticket; 3 or more tickets/$6 + $_____

26th Anniversary Friend’s tax-deductible contribution in any amount $_____  
(see reverse side for benefits)

Total= $_____

(over please →)
I WANT TO BE A SUPPORTER OF THE EMBASSY SERIES AS A “FRIEND”
26th Anniversary Season

☐ ($50-$99) (Name in program, mailings + pre-season notifications of concerts).
☐ ($100-$249) (Above + reserved “angel” seating in larger embassies)
☐ ($250-$499) (Above + personal reserved seating for all concerts).
☐ ($500-$999) (Above + option to exchange tickets, subject to availability.
☐ ($1,000-$2,499) (Above + no handling charges on ticket orders).
☐ ($2,500-$4,999) (Above + special mention in program + invitation to a special event for 2 persons).
☐ ($5,000-$9,999) (This category is for sponsorship of a concert) and The Embassy Series will organize a special package, tailored to your needs.
☐ ($10,000 +) (This category helps endow the Embassy Series in perpetuity and allows us to present the finest programs and artists and a customized benefits package).
☐ ($25,000 +) (26TH ANNIVERSARY SPECIAL SPONSORSHIP)

☐ Other Contribution: $__________. ALL SALES ARE FINAL.

IMPORTANT NOTICE: RESERVED SEATS CAN ONLY BE HELD UNTIL 5 MINUTES BEFORE CONCERT.

__ My employer will match my gift. (Please check with the personnel office where you work.)
__ I wish my “Friends” donation will be allocated to inviting students and persons under 25.

The Embassy Series is a nonprofit, tax-exempt organization under Section 501(c)3 of the Internal Revenue Code. Gifts to The Embassy Series are tax-deductible to the extent allowed by law.

Please complete and return this form, with your check or payment information to The Embassy Series, PO Box 9871, Washington, DC 20016 or call (202) 625-2361. You may also e-mail us at concerts@embassyseries.org.

Name ____________________________
Address ____________________________
City __________________ State ______ Zip ______
(________________) (________________)
Phone __________________ Cell phone __________________
E-mail ____________________________ (Fill this out to receive bi-monthly e-mail)

Payment
☐ Check Enclosed (Please make check payable to The Embassy Series)
☐ Charge my: ☐ American Express ☐ MasterCard ☐ VISA

__________________________
*Code #:

Expiration Date __________________

Name on Card __________________

Signature ________________________

*American Express: 4 digit code in front; MC/VISA: 3 last digits in signature space.