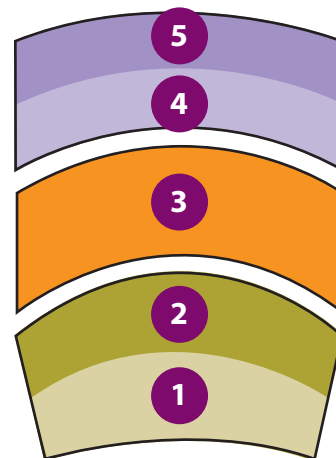




Michael & Susan Dell Hall Seating Map



1. **Orchestra** - \$10,000/seat
2. **Parterre** - \$7,500/seat
3. **Mezzanine** - \$5,000/seat
4. **1st Tier Balcony** - \$2,500/seat
5. **2nd Tier Balcony** - \$1,500/seat

Give her a legacy of inspiration.

The Long Center is an extraordinary investment in the economic and cultural life of Austin by those who live and work here. Our growing reputation as a world-class performing arts venue is a tribute to their vision of what our city can be. Please help us build our legacy of artistic growth, service and inspiration, and ensure your children and grandchildren have a future filled with the arts, by making a gift to the Long Center.

In appreciation of your tax-deductible contribution of \$1,500 or more, a seat in the magnificent Michael & Susan Dell Hall will be inscribed in your honor or that of a loved one.

Become a permanent part of the art and soul of Austin. Take your seat at the Long Center today!

Seating is limited so be sure to take your seat before the final curtain call!



**To participate in the Long Center's Seat of Honor program:
Call 512.457.5117
Or visit TheLongCenter.org/SOH**



Seat of Honor Order Form

Thank you for your commitment to the performing arts in Austin. Please complete this form so that we may reserve your Seat(s) of Honor and return it to:

The Long Center
P.O. Box 301449
Austin, Texas 78703-0025

In support of the Long Center, I pledge the following tax-deductible gift to honor my family, friend, or company with a Seat of Honor: (checks should be made payable to the Long Center.)



Please reserve a Seat(s) of Honor in the following sections:

- | | |
|---|--------------------------|
| <input type="radio"/> Orchestra Seats (\$10,000 per seat) | Number of seats _____ |
| Name(s) of Honoree or in Memory of _____ | |
| <input type="radio"/> Parterre Seats (\$7,500 per seat) | Number of seats _____ |
| Name(s) of Honoree or in Memory of _____ | |
| <input type="radio"/> Mezzanine Seats (\$5,000 per seat) | Number of seats _____ |
| Name(s) of Honoree or in Memory of _____ | |
| <input type="radio"/> 1st Tier Balcony Seats (\$2,500 per seat) | Number of seats _____ |
| Name(s) of Honoree or in Memory of _____ | |
| <input type="radio"/> 2nd Tier Balcony Seats (\$1,500 per seat) | Number of seats _____ |
| Name(s) of Honoree or in Memory of _____ | |
| | Total seats _____ |
| | Total cost _____ |

Please contact me to discuss this once in a lifetime opportunity.

I wish to pay my donation:

- In full Monthly Quarterly Annually
 Please contact me for stock or securities transfer instructions.



Name: _____

Signature: _____ Date: _____

Please charge my gift to: Visa Mastercard American Express Discover Check Enclosed

Card Number: _____ Expiration Date: _____ Security Code: _____

Preferred Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Fax: _____ Email: _____

Seats will be assigned beginning with the front and center of the house on a first come first served basis.