

10 GREAT YEARS

SEASON SEAT MEMBER RELOCATION FORM:

All relocation requests must be in writing. We will not be accepting seat relocation requests over the phone lines. Please note, relocation requests will be accepted by mail and email beginning February 11th at 7:30pm. Any requests submitted prior to this time will not be accepted.



Here are three easy ways you can put in your request.

- ONLINE** at: www.SunTrustBroadway.com and click on Season Seat Member Login to renew your season.
- E-MAIL** a copy of this form and your renewal invoice to Relocations@dpacnc.com to renew your seats and put in your change request.
- MAIL** a copy of this form and your renewal invoice to DPAC, 123 Vivian St, Durham, NC 27701.

Each relocation request will be date and time-stamped when received, and priority will be based on when we receive your initial order. Starting in late June, season seat specialists will place all requests in the order in which they were received and begin the relocating process. Please note that with such high demand, certain seat locations such as aisle do not become available often. Original seats will be maintained if your request is unavailable. Each member need only submit one relocation request. Please note, submitting a request online through your DPAC Account Manager takes the place of submitting a form. It is not necessary to do both.

No phone calls until
 February 16th please!
 Renew online today at
SunTrustBroadway.com

SEATING PREFERENCES

I would like to request a seat change. In requesting this seat change, I understand that the Ticket Center staff will use their best judgment to accommodate this request. I further understand that I will not be contacted in advance to approve the specific details of the seat change and that once changed, my current seats will be reassigned and cannot be retrieved. I understand that all seat change requests will be fulfilled in the order in which they are received and that if no seats become available that match my specific request, my current seats will be retained. I understand that I will be notified via e-mail at the end of June if my seat change request has been fulfilled.

Seat Change Instructions: (Please check all that apply.)

- Same price level, closer to front
- I'm willing to move ___ # of seats to the side to be closer to the front
- By checking this box, I agree to move to limited view seats if they are closer to the front than my current seats.
- Same price level, closer to center
- I'm willing to move ___ # of rows back to be closer to center
- Move me to an aisle seat
- I'm willing to move ___ # of rows back to get an aisle seat
- By checking this box, I request INSIDE aisle seats only. I understand that if only outside aisles are available, I will not be resealed.
- I MUST have an aisle seat
- I only prefer to have an aisle seat
- Move me to the Heart of Broadway Package - Orchestra seating (limited availability)
- Move me to the Broadway's Best Package - Orchestra seating (best available)
- Move me to the Value Circle - Orchestra seating (best available)
- Move me to the Broadway's Best - Grand Tier seating (limited availability)
- Move me to the Value Circle - Grand Tier seating (best available)
- I'm willing to upgrade to a higher price level if it fulfills my request.
- Add me to the wait list for Gold Circle Seating
- Contact me about upgrading to a President's Club package (Gold Circle seats available for President's Club members only)
- Change my performance time to:
 - Tuesday Wednesday Thursday Friday Saturday Matinee Saturday Evening Sunday Matinee Sunday Evening
- By checking this box, I request to change days ONLY if my same or similar seats are available. I understand that if comparable seats are not available, my seats will remain on my current day
- Move my separated seats to be together
- Please seat me with account holder _____
- I request accessible seats as follows:
 - A member of my party
 - uses a wheelchair and will be using the wheelchair as a seat uses a wheelchair and will be transferring to a fixed theatre seat
 - is mobility impaired and cannot walk up/down stairs is visually impaired is hearing impaired