

## THE OLD BABYLONIAN AGE TICKET ORDER FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (work) \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Time:** 5 Monday evenings, 7:30 - 9:00 pm (April 12 - May 24, 2010) **no programs April 19 or May 10)**

**Place:** Piness Auditorium, Wilshire Blvd Temple 3663 Wilshire Blvd, Los Angeles  
(at Harvard, between Vermont & Western)

FULL SERIES (5 lectures):		
_____ # of Adults	\$95/series	\$_____
_____ # of CMAA Members	\$75/series	\$_____
	<b>SERIES AMOUNT</b>	<b>\$_____</b>

DATE	# OF TICKETS	Adults	CMAA Members	Total
<input type="checkbox"/> April 12th		X \$22/lecture	X \$18/lecture	\$_____
<input type="checkbox"/> April 26th		X \$22/lecture	X \$18/lecture	\$_____
<input type="checkbox"/> May 3rd		X \$22/lecture	X \$18/lecture	\$_____
<input type="checkbox"/> May 17th		X \$22/lecture	X \$18/lecture	\$_____
<input type="checkbox"/> May 24th		X \$22/lecture	X \$18/lecture	\$_____
IF SPACE IS AVAILABLE			AMOUNT	\$_____

**TICKETS FOR INDIVIDUAL LECTURES WILL BE HELD AT THE DOOR**

**CMAA MEMBERSHIP** (Check Member Level):

\$40 Individual    \$65 Couple    \$150 Sponsor\* (2 people)    \$300 Patron\* (2 people)

\* includes invitations to Special Events of the Directors' Club.

MEMBERSHIP AMOUNT                      \$\_\_\_\_\_

**VIDEO / AUDIO ORDERS:**

Full series 4	<input type="checkbox"/> \$89 DVDs	<input type="checkbox"/> \$70 CDs	<input type="checkbox"/> \$62 Cassettes	Amount	\$_____
Single lectures	<input type="checkbox"/> \$28 DVDs	<input type="checkbox"/> \$21 CDs	<input type="checkbox"/> \$19 Cassettes	Amount	\$_____
Select Dates	<input type="checkbox"/> April 12	<input type="checkbox"/> April 26	<input type="checkbox"/> <del>May 3</del>	<input type="checkbox"/> May 17	<input type="checkbox"/> May 24

The speaker for the May 3 lecture will not allow recording.

**TOTAL AMOUNT ENCLOSED                      \$\_\_\_\_\_**

Note: No credit card orders will be accepted. Enrollment is for this lecture series only.

**Registrations must be received no later than April 5, 2010 to guarantee your place.**

Mail this form and your check to:

California Museum of Ancient Art, PO Box 10515, Beverly Hills, CA 90213

Phone: (818) 762-5500