



A Midsummer Night's Dream

Friday, July 14th

8:00 pm at Ewing Manor

William Shakespeare's "A Midsummer Night's Dream" is a family friendly comedy following four young lovers into an enchanted forest for an unforgettable journey of trickery, laughter, and love. Featured in this production is a musical Puck, whose original score is sure to cast a spell on you!

The SFEA member price is \$18. SFEA has reserved 140 tickets in the Gold Section for this performance. An employee SFEA member may bring any or all dependent family members (listed on their membership) at the member price OR one guest at the member price. Violation of membership privileges (signing up those not on your membership) could lead to your SFEA membership being revoked. If you are unsure of your membership benefits or who is included as a member, please contact the SFEA office. Due to the anticipated drawing of this event, additional guest tickets will not be available at this time.

Enrollment for this event closes Wednesday, June 14th at 1:00pm. All enrollment forms and money must be received in the Corporate Activities Office, SC-1, or at the Corporate South Activities Office, K-1, by 1 p.m. on the close date. In the event the enrollments exceed the tickets available, a drawing will take place. If you would like to sit with an SFEA friend, ***please staple forms together and mail in one envelope.*** Make checks payable to SFEA. The Activities Office is not responsible for cash sent through the mail or late delivery of mail. Please contact the Activities Office if you need to cancel your enrollment. If there is a waiting list and your ticket is resold, your money will be refunded. If there is not a waiting list, your money will not be refunded.

If you have any questions, please contact SFEA Board Member Christina Boring at christina.boring.lrb1@statefarm.com

Mail In: #3 State Farm Plaza, SFEA K-1, Bloomington, IL 61791

A Midsummer Night's Dream (#714) - July 14th

Enrollment Closes on June 14th

Name _____ Ext. _____ SFEA # _____

Building _____ Floor _____ Department _____ Alias/Email _____ Check # _____

Retiree Address _____

address city state zip phone # email

PLEASE LIST ALL PARTICIPANTS YOU ARE PAYING FOR, INCLUDING YOURSELF:

of tickets @ \$18 _____

Total Amount Enclosed \$ _____