



2010-11 Season Ticket Order Form

PERSONAL INFORMATION:

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Mobile Phone: _____
 Email: _____

ORDER INFORMATION:

On the Glass Seats (only 132 available)	Qty: _____ x \$329 = \$ _____
Requested seats in	Section: _____ Row: _____ Seats _____
Lower Reserved Full Season Ticket	Qty: _____ x \$299 = \$ _____
Requested seats in	Section: _____ Row: _____ Seats _____
15-Game Flexx Package	Qty: _____ x \$179 = \$ _____
Discounted Parking Pass (\$60 regular)	Qty: _____ x \$40.00 = \$ _____
	Total = \$ _____
	Amount Enclosed Full <input type="checkbox"/> <input type="checkbox"/> Deposit

PAYMENT INFORMATION:

Payment Method: Cash Credit Card
 Credit Card Type: MC VISA DSC AMX
 Name on Card (if different than above): _____
 Address (if different than above): _____
 Credit Card Number: _____
 Exp. Date: _____ VCode (found on back of card): _____
 Signature: _____ Date: _____

CREDIT CARD WAIVER

I, _____, agree to allow the Urban Plains Center box office to charge my credit card on the schedule listed below:

On the Glass Season Ticket:
 Payment #1 on the day I reserve my package with a non-refundable deposit of \$99 and additional payments the two (2) subsequent months of \$115 each month.

Lower Reserved Full Season Ticket:
 Payment #1 on the day I reserve my package with a non-refundable deposit of \$99 and additional payments the two (2) subsequent months of \$100 each month.

15-Game Flexx Plan:
 Payment #1 on the day I reserve my package with a non-refundable deposit of \$79 and additional payments the two (2) subsequent months of \$50 each month.

Signature: _____ Date: _____