



OPERATED BY MERCER UNIVERSITY

Mercer Ticket Sales EVENT TICKETING FORM

All information **MUST** be completed before the request will be processed and must be submitted **TWO WEEKS** before the on-sale date of the event requested.

ORGANIZATION REQUESTING TICKETING

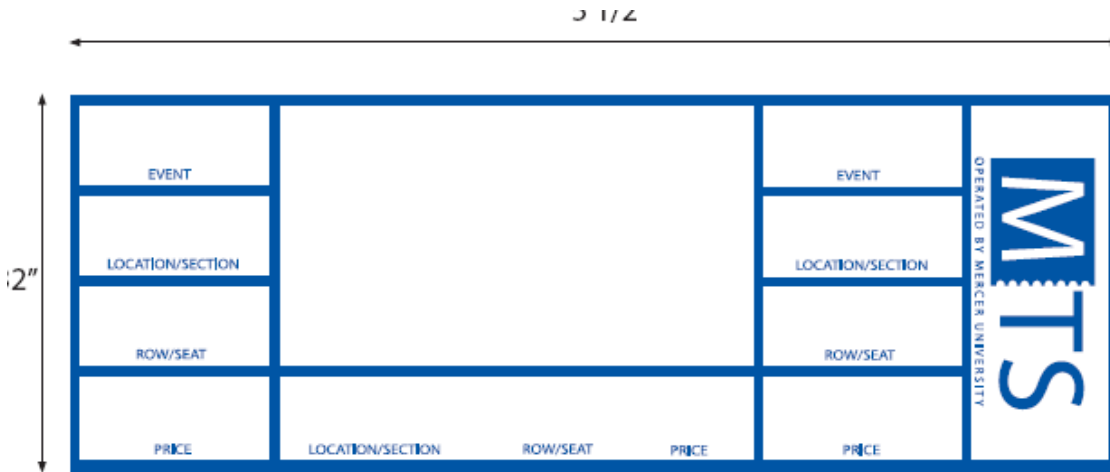
| | | |
|---|----------------------|-------------|
| Organization Name _____ | | |
| Contact Person _____ | Title _____ | |
| Address _____ | City,State,Zip _____ | |
| Phone Number _____ | Fax Number _____ | Email _____ |
| Contact Signature _____ | Date _____ | |
| Date Filed (<i>Mercer Ticket Sales use</i>) _____ | | |

EVENT INFORMATION

| | |
|---|--------------------------|
| Event Date _____ | Event Artist/Title _____ |
| Event Start Time _____ | Event End Time _____ |
| Date tickets should go on sale _____ | |
| Desired Venue: <input type="checkbox"/> Backdoor Theater <input type="checkbox"/> Fickling Hall <input type="checkbox"/> University Center <input type="checkbox"/> Grand Opera House | |
| Is this event reserved seating or general admission? <input type="checkbox"/> Reserved Seating <input type="checkbox"/> General Admission | |
| Are there different buyer types (<i>i.e. students- \$5, adults- \$10</i>)? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| If so, what are the types and their prices? _____ | |
| _____ | |
| _____ | |
| Please describe your event: _____ | |
| _____ | |
| _____ | |

TICKET DESIGN

Please write in what you would like to have displayed on your tickets. Keep in mind there are limitations to ticket design, but we will do our best to honor your request.



APPROVAL

Mercer Ticket Sales Signature _____ Date _____

Date Filed (*Mercer Ticket Sales use*) _____