

**2019-2020 INDIANA STATE UNIVERSITY
WOMEN'S BASKETBALL
SEASON TICKET ORDER FORM**

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

| | | | Quantity | | | Total |
|-------------|----------|---|-----------------|---|----------------|--------------|
| Courtside | \$ 60.00 | x | _____ | = | \$ | _____ |
| Floor Seats | \$ 50.00 | x | _____ | = | \$ | _____ |
| Priority I | \$ 40.00 | x | _____ | = | \$ | _____ |
| | | | | | Processing Fee | 3.00 |
| | | | | | TOTAL | _____ |

Method of Payment (Circle One):

Check or money order (made payable to ISU) Check # _____ Cash Receipt # _____

Visa [] MC []

Card # _____ Expiration Date _____

Signature _____ CIN # _____

Return form and payment to:

ISU HULMAN CENTER

200 N. 8th Street

Terre Haute, IN 47809

Phone - 812.237.3737

Fax - 812.237.3741

| OFFICE USE ONLY | | |
|------------------------|------------|-------------|
| Order taken by _____ | Date _____ | Time _____ |
| Account # _____ | | |
| Section _____ | Row _____ | Seats _____ |