



Facility Scheduling and Promotion

Ticket Request Form General Admission Events

Name of Event: _____

Event Date: _____

Event Times: Start: _____ End: _____

Location: _____

Time Doors Open: _____ Date Ticket Sales to Begin: _____

Buyer Type and Cost per Ticket: (Please meet with a member of the Box Office staff if you need other buyer types.)

General Admission _____ Senior (65 or older) _____

Student (non-WCSU) _____ WCSU Employee _____

WCSU Student _____ Complementary _____ \$0.00

Child (specify max age) _____

Do you want tickets available on the Internet (Not all ticket types are available on the internet)? There is a \$5.00 set-up fee per performance for internet sales. All tickets are subject to web fees. **Yes** **No**

Information to appear on the ticket:

Name of Event

Event Date

Event Start Time

Time Doors Open

Type of Buyer

Cost of Ticket

Additional Information to appear on ticket (2 lines – max 30 characters each)

UNIVERSITY OFFICES FILL OUT THIS SECTION

Requested by: _____

Organization: _____

Email Address: _____

Telephone Number: _____

Account to Transfer to: _____

NON UNIVERSITY OFFICES FILL OUT THIS SECTION

Check to be payable to: _____

Tax ID Number: _____

Mail to: _____

I understand that the following will be deducted from the final settlement: ticket fee of \$.10 per ticket; any credit card fees; staffing of the venue box office, and any other university fees associated with the event. I certify that as an agent for the above named organization I am authorized to make this request.

Signature: _____ Signature Date: _____

Venue Manager: _____ Date: _____

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Box Office Use Only

Event Code: _____ Performance Code: _____

Processed by: _____ Date: _____