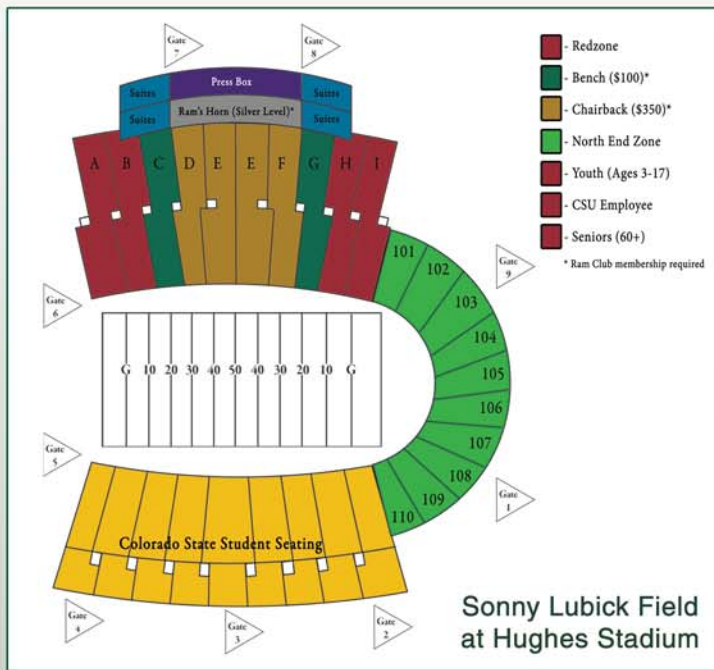


MONTHLY PAYMENT PLAN



Join the Ram Club

Improve your seat location and make a difference in the lives of CSU's more than 400 student-athletes by joining the Ram Club. For more information visit CSURamClub.com or call 970-491-4666.

Return payment form to:

102 McGraw Athletic Center
Fort Collins, CO 80523-0120
Fax: 970-491-1100



| SEATING AREA | QTY. | PRICE | TOTAL |
|-------------------------|-------|--------------|-------|
| Sideline | | | |
| Adult | _____ | \$199 | _____ |
| Youth (3-17) | _____ | \$110 | _____ |
| Seniors 60+ | _____ | \$180 | _____ |
| CSU Employee | _____ | \$180 | _____ |
| North End Zone | | | |
| Adult | _____ | \$125 | _____ |
| Youth (3-17) | _____ | \$ 60 | _____ |
| Parking (season) | | | |
| | _____ | \$ 30 | _____ |
| | | Subtotal | _____ |
| | | Processing | \$15 |
| | | TOTAL | _____ |

NAME _____
 ADDRESS _____
 PHONE (____) _____
 CREDIT CARD (Visa or MC) Card # _____

MONTHLY PAYMENT PLAN (3 payments)

TOTAL _____ / 3 MONTHS = _____

I _____ authorize CSU Athletics to charge my credit card _____ once a month for 3 months.

Signature _____ Date ____ / ____

Credit card will be charged on 6/1, 7/6 & 8/3.
 Final payment must be received by Aug. 3, 2009 in order to receive tickets.

Seat locations will be assigned in June. Priority will be given to Ram Club members, then allocated in the order in which completed forms were received.

For information on how to improve your seat location, visit CSURamClub.com or call 970-491-4666.

Please note specific seating requests on the back of this form.

CITY _____ STATE _____ ZIP _____
 EMAIL _____
 Exp. Date ____ / ____