



Order Taken By: _____ Date: _____

Northern Illinois University

2007-08 Women's Basketball Season Ticket Order Form

Season Tickets	Quantity	Price per Seat	Amount
General Public		\$50	
NIU Faculty / Staff ID _____		\$45	
Senior Citizen - 62 & Older DOB: ___/___/____		\$45	
Handling Fee			\$5.00
Total Amount Due			

If you are interested in being put on the waiting list for Courtside Seats, please call (815)753-1923.

Name _____	Account # _____
Address _____	Apt # _____
City _____	State _____
Phone _____	Zip Code _____
Email _____	
Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMX <input type="checkbox"/> DSC <input type="checkbox"/> NIU Payroll Deduct**	
Check/Credit Card # _____	Exp. Date _____

**** All NIU Payroll Deduct applications must be accompanied by the Basketball Payroll Deduct form and rcd by 10/12/07**

Notes / Seat Preferences:

Office Use Only	Date: _____	Initials: _____	Circle: _____	Host / Archtics _____	Mail / Will Call / InPerson _____
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