

FIRST MARKET STADIUM

SPIDER SEATS / SPIDER CLUB ORDER FORM

CONTACT INFORMATION (PLEASE PRINT)

Name _____

Are you currently a Spider Club member? _____

Address _____

City _____ State _____ Zip _____

Phone _____

E-mail _____

I WOULD LIKE TO CONTRIBUTE BY

_____ Participating in a Recognition Opportunity _____ FOOTBL_STD

_____ Becoming a Spider Club Member by donating \$ _____ SAF
MINIMUM OF \$100

PLEASE RESERVE

_____ No. of Red Spider Seats (x \$2000) = \$ _____ FOOTBL_STD

_____ No. of Blue Spider Seats (x \$1000) = \$ _____ FOOTBL_STD

Total Amount Owed = \$ _____

CHOOSE PAYMENT OPTION BELOW

SPIDER SEATS PAYMENT PLAN

_____ Pay entire amount owed by June 30, 2006

_____ Make annual payments for five years as follows:

Amount Due June 30, 2006 = \$ _____

Amount Due June 30, 2007 = \$ _____

Amount Due June 30, 2008 = \$ _____

Amount Due June 30, 2009 = \$ _____

Amount Due June 30, 2010 = \$ _____

PAYMENT METHOD

_____ Check _____ Credit Card CIRCLE VISA | MASTERCARD | AMERICAN EXPRESS

Account Number _____ Exp. _____

Signature _____