



2018-2019 ADVANCE TICKET PACKAGE ORDER FORM

Move: I'd like to change my seat(s) for the upcoming season. Requested seat/section:

Prices valid through May 31, 2018.

| | | | |
|--------------------------|--|--|--|
| Name: | | Seat Location(s): | |
| Address: | | 2018-2019 Full Season: | |
| City, State, Zip: | | 2018-2019 Saturday Package: | |
| Phone: | | 2018-2019 Flex Package: | |
| Email: | | Senior: 65+, Student: 13-18, Child: 5-12 | |

| PACKAGE TYPE | | PREMIUM | RESERVED | # OF TICKETS | AMOUNT DUE |
|----------------------------|-------------------|-----------|-----------|--------------------------|------------|
| Full Season | Adult | \$595 | \$544 | | |
| | Senior & Military | \$544 | \$493 | | |
| | Student | \$391 | \$391 | | |
| | Child | \$289 | \$289 | | |
| Saturday Package | Adult | \$21/Game | \$19/Game | | |
| | Senior & Military | \$19/Game | \$17/Game | | |
| | Student | \$14/Game | \$14/Game | | |
| | Child | \$9/Game | \$9/Game | | |
| Flex-17 Package | Adult | \$357 | \$323 | | |
| | Senior & Military | \$323 | \$289 | | |
| | Student | \$238 | \$238 | | |
| | Child | \$153 | \$153 | | |
| Flex-10 Package | Adult | \$215 | \$195 | | |
| | Senior & Military | \$195 | \$175 | | |
| | Student | \$145 | \$145 | | |
| | Child | \$95 | \$95 | | |
| Flex-4 Package | Adult | \$86 | \$78 | | |
| | Senior & Military | \$78 | \$70 | | |
| | Student | \$58 | \$58 | | |
| | Child | \$38 | \$38 | | |
| Parking Pass | 33 Games | | \$99 | | |
| TOTAL # of TICKETS: | | | | TOTAL AMOUNT DUE: | |

| | | | |
|-------------------------------------|----------------|--|---------------------------|
| Date First Payment Received: | Amount: | Method: | Balance Remaining: |
| | | <input type="checkbox"/> Cash <input type="checkbox"/> Check (# _____) <input type="checkbox"/> Credit | |

Automatic Monthly Payment Program

- Balance Remaining will be divided into equal monthly payments starting the 1st of the month after the down payment is received and concluding in October.
- By initialing, I authorize the Erie Otters to use my credit card provided for my Automatic Monthly Payment.

| | | | |
|------------------------|-------------------------|----------------------|------------------------|
| Account Number: | Expiration Date: | No. Payments: | Amount/Payment: |
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