

Carmel High School 2017-2018 Ticket Application

1. Name _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone () _____ Business Phone () _____ Email _____



2	Name to be printed on ticket: <i>Please print legibly</i>	Ticket Type (check one):				Price
		Adult All-Sport (with Reserved Seat) \$65	Youth All-Sport (without Reserved Seat) \$40	Youth All-Sport (with Reserved Seat) \$40	Adult Varsity Football Only (with Reserved Seat) \$40	
	1)		Grade:	Grade:		
	2)		Grade:	Grade:		
	3)		Grade:	Grade:		
	4)		Grade:	Grade:		
<i>Attach addl. sheet if ordering more than 4 tickets</i>					Sub Total	
3	Greyhound Booster Club (check one box) <i>Your donation entitles you to preferential reserved seating at home varsity football games. Thank you for your support!</i>	<input type="radio"/> Booster			\$50.00	
		<input type="radio"/> Super Booster (If over \$100 please indicate sport or scholarship to which money should be designated) _____			\$100.00	
		Print name as you want it to appear on patron page: _____ _____				
4	Total Amount Enclosed					\$

Return completed form to:
 Amy Scher, Ticket Manager
 Carmel High School Activities Office
 520 E. Main Street
 Carmel, IN 46032

Office Use Only: Section _____ Row _____ Seat(s) _____ Paid # _____ GBC _____
