EAGLE SEATS RESERVATION FORM

All orders mailed or e-mailed to IMG COLLEGE SEATING will be subject to a \$3.00 processing fee.

PLEASE PRINT, COMPLETE, AND EITHER MAIL OR SCAN AND EMAIL TO ONE OF THE FOLLOWING ADDRESSES

Mail Order:	IMG College Seating 540 North TradeStreet Winston-Salem, NC 27101	Phone #: School: Season:	877-549-7346 Southern Mississippi 2024		
YOUR DETAILS		YOUR LOCA	TION		
Full name		Season Ticket Account #			
Address	SEAT LOCATION(S)				
		Section	Row	Seat	
City		Section	Row	Seat	
State		Section	Row	Seat	
ZIP		Section	Row	Seat	
Phone Number		Section	Row	Seat	
Email Address		Number of Stadium Seats Desired			
METHOD OF PAY	/MENT				
Please reserve	seat(s) x \$50.00 (including sales tax) +	\$3.00 (processin	ng fee) for a total of \$		
		Amount of check enclosed			
		(Ple	ase make checks payable to IM	G College Seating)	