DUKE 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 Trade Street Winston-Salem, NC 27101	S	Phone #: school: season:	877-421-6415 NCAA Softball 2017		
YOUR DETAILS			Season Ticket Account			
Address			City			
			State		. ZIP	
Phone Number	Email Address					
SEAT LOCATION(S)						
Game	Section (s) Row (s) Se	at (s)	Game	Section (s)	Row (s)	Seat(s)
NC Central			Florida Sta	ate		
Northwestern			Pittsburgh			
Baylor			Georgia Te	ech		
Miami (FL)			Total Number of Stadium Seats desired			
METHOD OF PA	YMENT					
Pleasereserve	seat(s) x (including sal	les tax) + \$3.00 (processi	ing fee) for a	total of \$		
	Amount of check enclosed					
	(Please make checks payable to IMG CollegeSeating)					