CRIMSON TIDE SEATS RESERVATION FORM

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

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YOUR DETAILS Full name				Season T	Season Ticket Account			
Address				City				
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Phone Number	hone Number				Email Address			
SEAT LOCATION(S)								
Game	Section (s) Ro	w (s)	Seat (s)	Game	Section (s)	Row (s)	Seat(s)	
Arkansas State				Mississip	Mississippi State			
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Pleasereserve	seat(s) >	x (including	g sales tax) + \$3.00 (proce	essing fee) for a	e total of \$			
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