TERP 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			Phone #: School: Season:	877-421-9370 Maryland 2018			
YOUR DETAILS Full name				Season Ticket Account				
Address				City				
				State		ZIP		
Phone Number	Email Address							
SEAT LOCATION	N(S)							
Game	Section (s)	Row (s)	Seat (s)	Game	Section (s)	Row (s)	Seat(s)	
Temple				Michigan	State			
Minnesota				Ohio Stat	:e			
Rutgers				Total Nui	otal Number of Stadium Seats desired			
Illinois								
METHOD OF PA	YMENT							
Pleasereserve	seat	(s) x (including	g sales tax) + \$3.00 (proce	essing fee) for	a total of \$			
	Amount of check enclosed							
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