NOLE 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 2710	1	Phone #: School: Season:	877-421-6992 Florida State 2019			
YOUR DETAILS			Season Ticket Account				
Address			City				
			State		. ZIP		
Phone Number		Email Address					
SEAT LOCATIO	N(S)						
Game	Section (s) Row (s)	Seat (s)	Game	Section (s)	Row (s)	Seat(s)	
ULM			Miami				
Louisville			Alabama	State			
NC State			Total Number of Stadium Seats desired				
Syracuse							
METHOD OF PA	YMENT						
Please reserve	seat(s) x (includin	g sales tax) + \$3.00 (proce	essing fee) for	a total of \$			
			Amount of ch	Amount of check enclosed			
		(Please make checks payable to IMG College Seating					