

NJSIAA WRESTLING CHAMPIONSHIPS 2012 GROUP ORDER FORM

DATE:	_____
EVENT NAME:	NJSIAA STATE WRESTLING CHAMPIONSHIPS ALL SESSION PASS
DATE OF EVENT/TIME:	FRIDAY 3/2/12 5PM, SATURDAY 3/3/12 10AM & 5PM, SUNDAY 3/4/11 10AM
CUSTOMER'S NAME:	_____
ADDRESS:	_____
CITY/STATE/ZIP:	_____
PHONE # (required):	_____
COMMENTS:	_____ _____

Ticket Price *: **\$40.00**

of Tickets **: _____

Handling Fee: **\$15.00**

*Includes \$4 in facility fees

**There is a 50 ticket limit per order for this event

Total Cost: _____

WILL CALL

OR

MAIL*

*Please circle one

****All customers must present a Photo ID at time of pick up.**

PAYMENT INFO

WE ACCEPT VISA, MC, AMEX, DISCOVER AND CHECKS. IF YOU ARE PAYING BY CREDIT CARD, PLEASE FILL OUT INFO BELOW. IF YOU ARE PAYING BY CHECK, PLEASE MAKE PAYABLE TO **BOARDWALK HALL**

CREDIT CARD #: _____

Verification Code: _____

CARD TYPE: _____

EXPIRATION DATE: _____

NAME ON CARD: _____

PLEASE MAIL ALL ORDER FORMS TO:

BOARDWALK HALL BOX OFFICE

2301 BOARDWALK

ATLANTIC CITY, NJ 08401

OR EMAIL A COPY TO: boffice@accnter.com

**** No Group Orders Accepted after 2/3/12 ****

BOX OFFICE USE ONLY

LOCATION: _____

ACCOUNT #: _____

RECEIVED BY: _____

DATE: _____

1/18/2012