

BOX OFFICE TICKET SALE REQUEST FORM

Event Title:	
Name of Organization/Event Produce	er:
Event Date:	
Event Location:	
Event Start Time:	Time Doors will open:
Total # of Tickets to be sold (if different	ent than seating capacity of venue):
Seating: (select one) Reserved Seating	General Admission
Pricing: *Note: An Oswego State Student discount price	e must be offered for all events held at Oswego State venues
Presale General Public: Faculty/Staff: Senior/Youth: Oswego State Student:	Day of Price General Public: Faculty/Staff: Senior/Youth: Oswego State Student:
Any additional ticket prices:	
Will you require complimentary tickets	s to be printed? YesNo
Date for tickets to go on sale:	
Length of event:	Is there an intermission? YesNo
Event website:	
Event description: Please email to tick	xets@oswego.edu
Will it be necessary to have the box o	office open the night of the event? YesNo
	Campus Center, Downtown and Tyler Box Offices and online at tickets.oswego.edu
Name of Ticket Sale Requestor:	
Signature of Ticket Sale Requestor:_	
Email of Ticket Sale Requestor:	
*Note: Once this event is registered in a	our system, no additional changes can be made

Please return this form to the Box Office at the Campus Center or Hewitt Union Box Office a minimum of 10 business days prior to the ticket sale date.

*Note: There is a \$0.50 charge per ticket sold for system usage.