

GROUP SALES

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SPORTS · CONCERTS · FAMILY

IZOD CENTER

MONSTER JAM • IZOD CENTER • FEBRUARY 3 @ 7:30 PM & FEBRUARY 4 @ 2 PM & 7:30 PM GROUP SALES ORDER FORM – FAX 201-896-0590 – PHONE 201-460-4370

Instructions: Form must be filled out completely and signed or order will not be accepted. Return via fax, mail or e-mail.

Show Day / Date: _____ Show Time: _____

Contact Person: _____

Group Name: _____

Address: _____

City: _____ State: _____ Zip: _____ E-Mail: _____

Day Phone: _____ Night Phone: _____ Fax: _____

# of Tickets (20+)	Full Ticket Price	Discount Price	Seating Level	Valid Performances	Total Cost (# of tickets x price = cost)
	\$41.50	\$41.50	Lower Level	Feb. 3 @ 7:30pm & Feb. 4 @ 2pm & 7:30pm	
	\$31.50	\$26.50	Adults Save \$5	Feb. 3 @ 7:30pm & Feb. 4 @ 2pm & 7:30pm	
	\$31.50	\$16.50	Kids (2-12 years old)	Feb. 3 @ 7:30pm & Feb. 4 @ 2pm & 7:30pm	
	\$31.50	\$16.50	SCOUTS	Feb. 3 @ 7:30pm & Feb. 4 @ 2pm & 7:30pm	
	\$10	\$10	Adult & Kids PIT PASS	Feb. 3 from 5:30-6:30pm Feb. 4 @ from 11:00-1pm	
				Group Sales Fee	\$ 10.00
				Optional Parking Fee Bus \$30 or Van \$15	
				TOTAL:	

**** ADA GROUPS MUST SPECIFY THE TYPE OF SEATING NEEDED** # of WC ___ # of FC ___**

Method of Payment:

Check: (payable to NJSEA) Check #: _____ Amount Paid: \$ _____

Personal/business checks will be accepted until January 13, 2012. Credit card, cash, certified check or money orders only after that time.

Credit Card: MC / Amex / Visa Amount Paid: \$ _____

Card # _____ Exp. Date: _____

Group Ticket Guidelines

To order group tickets, you must complete this form and return with full payment. The number of tickets purchased per event must be 20 or more to be eligible as a group ticket purchase. Seating is assigned on a best available first-come, first-served basis upon payment in full. Tickets are printed and mailed within three weeks of full payment. Tickets will not be mailed after January 27, 2012. All orders processed after that date must be picked up in person prior to the performance. Tickets can be mailed via UPS or FedEx upon request and receipt of valid account number or authorized credit card number. There are no full or partial refunds or full or partial exchanges on tickets purchased. **Tickets & seat locations are subject to availability. ALL SALES ARE FINAL.** ADA group information call 201-460-4370.

X _____ Date: _____

Authorization: This signature and date authorizes credit card charge; accepts all group ticket guidelines; and accepts responsibility for payment in full on tickets purchased.

Office Use Only:

Account #: _____ Sales Manager: _____ Date/Time: _____

Received: _____ Location(s): _____

Notes: _____

IZOD Center Group Sales, PO Box C-250, East Rutherford, NJ 07073 • Email: groupsales@njsea.com

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IZODCENTER.com/groupsales