



## 2017 Girls Basketball State Championship Ticket Order Form

If ordering both girls' and boys' championship tickets, please send separate payment, or your order will be returned to you.

Return this form, with payment for tickets and \$1.00 handling charge, to the NSAA, 500 Charleston Street, Suite 1, Lincoln, NE 68508. These tickets may be used at any site, any session and are *subject to capacity*. *Admittance is not guaranteed*. Moving from one site to another within a session will require an additional ticket. No refunds will be made on these pre-sale tickets.

Using the schedule below, determine the number of **SESSIONS** for which you will need adult tickets and students tickets. Determine the total cost plus the \$1.00 handling charge. Orders filled by mail must be received by **February 24<sup>th</sup>**.

### CHAMPIONSHIP DATES – March 2, 3, 4, 2017

Day/Session	Time	Pinnacle Bank Arena	Sports Center	Lincoln North Star	Lincoln Southwest	Adult	Student	Total Cost
<b>Thursday</b>								
<b>Session 1</b>	9:00am	B	C1	D2	D1			
	10:45am	B	C1	D2	D1			
<b>Session 2</b>	2:00pm	A	C1	C2	D1			
	3:45pm	A	C1	C2	D1			
<b>Session 3</b>	7:00pm	A	B	C2	D2			
	8:45pm	A	B	C2	D2			
<b>Friday</b>								
<b>Session 4</b>	9:00am	C1	D1					
	10:45am	C1	D1					
<b>Session 5</b>	2:00pm	B	C2					
	3:45pm	B	C2					
<b>Session 6</b>	7:00pm	A	D2					
	8:45pm	A	D2					
<b>Saturday</b>								
		Championship			Third Place			
					Lincoln SW			
<b>Session 7</b>	9:00am	C1		9:00am	C2			
	11:00am	D1		11:00am	C1			
<b>Session 8</b>	1:00pm	B		1:00pm	D1			
	4:30pm	C2		3:00pm	D2			
	6:30pm	A						
	8:30pm	D2						
					TOTAL TICKETS			
						@ \$7.00	@ \$5.00	

**Payment Information** (please indicate which form of payment will be used)

\_\_\_\_\_ Cash      \_\_\_\_\_ Credit Card (\$2.50 convenience charge)

*\*Personal Checks will not be accepted.*

**Ticket Charges:** \$ \_\_\_\_\_

**Handling Charge:** \$ \_\_\_\_\_ +1.00

**Total Enclosed:** \$ \_\_\_\_\_

**Cardholder:** \_\_\_\_\_

**Card Number:** \_\_\_\_\_ **Expiration:** \_\_\_\_\_ **CVV Code:** \_\_\_\_\_

**Card Type** (please circle):      **VISA**                      **Mastercard**                      **Discover**                      **American Express**

**Billing Address:** \_\_\_\_\_

**City, State, ZIP:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Mail tickets to:

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

FOR NSAA USE ONLY
Amt:
Pynt:
Date:
Tix No.: