



# PURDUE FOOTBALL SEASON TICKET TRANSFER FORM

## SEASON TICKETS BEING TRANSFERRED

SECTION		ROW		SEAT NUMBERS	
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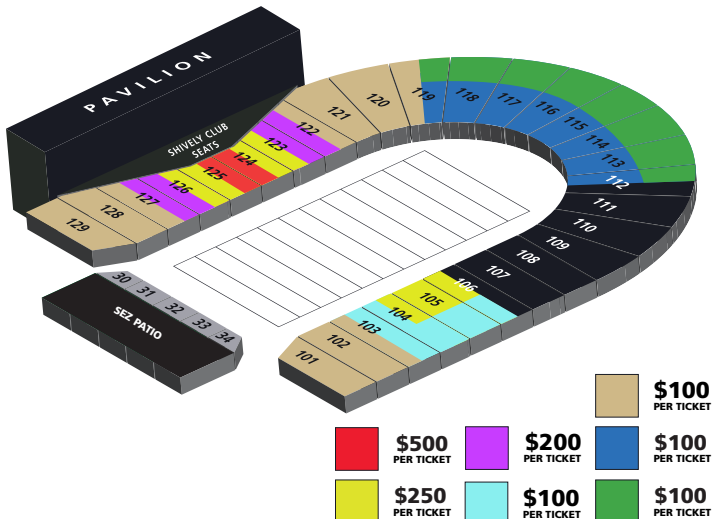
## CURRENT ACCOUNT HOLDER OR AUTHORIZED REPRESENTATIVE

FIRST NAME				LAST NAME			
EMAIL							
ADDRESS LINE 1							
ADDRESS LINE 2							
CITY				STATE		ZIP	
I authorize the above seats to be transferred to the account holder listed below and understand that I must be an active John Purdue Club member and have attached documentation verifying a direct family relationship (sibling, grandchild, child).							
SIGNATURE				DATE			

## NEW ACCOUNT HOLDER

FIRST NAME				LAST NAME			
EMAIL							
ADDRESS LINE 1							
ADDRESS LINE 2							
CITY				STATE		ZIP	
I authorize the above seats to be transferred from the account holder listed above to me and understand that I must be an active John Purdue Club member and have attached documentation verifying a direct family relationship (sibling, grandchild, child).							
SIGNATURE				DATE			

## SEASON TICKET TRANSFER FEES



## PAYMENT INFORMATION

QUANTITY OF SEASON TICKETS BEING TRANSFERRED	
COST PER SEASON TICKET (SEE MAP AT LEFT)	
TOTAL DUE \$	

<input type="checkbox"/> VISA	<input type="checkbox"/> MasterCard	<input type="checkbox"/> DISCOVER	<input type="checkbox"/> AMERICAN EXPRESS
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ACCOUNT #			
EX. DATE		CCV	
SIGNATURE			

Once completed, please send this form along with documentation verifying a direct family relationship to the Purdue Athletics Ticket Office either via email at [sporttix@purdue.edu](mailto:sporttix@purdue.edu) or mail to the following address:

**Purdue Athletics Ticket Office, Mackey Arena, 900 John R. Wooden Drive, West Lafayette, IN 47907**