

Date Received: _____ Signed Yellow Form Reservation #: _____
 Received By: _____ 25Live/CollegeNet Room Capacity: _____

TICKET REQUEST FORM – PRINT CLEARLY

Organization Name: _____ ASA Account Number: _____
 Contact Name: _____ Contact PSU Email: _____
 Contact Phone: _____ Event Day & Date: _____
 Event Headline: _____ Event Sub-Headline: _____
 Doors Open Time: _____ Event Start Time: _____
 Ticket Price(s): _____ Event Location: _____
 Is this event funded by UPAC? _____ Are Student ID's required for admission? _____
 How many tickets are you requesting? _____ Reserved Seating or General Admission? _____
 Ticket Color: _____ Additional Information: _____

Black & White (not gray-scale) logos may be submitted via email. Would you like to include a logo on the tickets? _____

Return this completed form, along with your 25Live/CollegeNet reservation confirmation, to the HUB Marketing Office, room 230 HUB-Robeson Center, phone: (814) 863-3398, email: HUBmarketing@psu.edu.

The Ticket Accountability Form tells us a number of things: how many tickets are for sale, what the ticket prices are, and how to apply to the Impact Fee.

On-Campus events of \$5.00 or more must include a \$0.75 Impact Fee for every ticket sold. After the event, you must bring all unsold tickets, as well as funds collected from sold tickets, to the ASA Office, 240 HUB-Robeson Center. The deposit should equal the quantity of sold tickets. Deposits must be made within 24 business hours after the conclusion of your event.

Sample tickets and additional information are available online at: studentaffairs.psu.edu/HUB under Association Student Activities, Treasurer Tools, Best Tips and Practices.



FOR OFFICE USE ONLY – DO NOT COMPLETE

	PSU Students	Faculty/Staff	General Public	Children/Youth
Ticket Prices	\$ _____	\$ _____	\$ _____	\$ _____
Tickets Per Price	_____	_____	_____	_____
Total Tickets	_____	_____	_____	_____
Serial Numbers	_____	_____	_____	_____
Comp Tickets	_____	_____	_____	_____
Comp Serials	_____	_____	_____	_____
Event Location	<input type="checkbox"/> On-Campus <input type="checkbox"/> Off-Campus		Impact Fee?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Delivered to ASA:	_____			Date: _____
ASA Staff Member:	_____			Date: _____
Organization Rep:	_____		Email: _____	Date: _____