

2010 TIME WARNER CABLE ALL-STAR CLASSIC



_____ (#1) Official All-Star Package (Rows 1-12) x **\$99.00/ticket** = \$ _____

_____ (#2) Official All-Star Package (Rows 13-24) x **\$92.00/ticket** = \$ _____

_____ (#3) All-Star Package (Rows 1-12) w/out Hospitality Events x **\$49.00/ticket** = \$ _____

_____ (#4) All-Star Package (Rows 13-24) w/out Hospitality x **\$42.00/ticket** = \$ _____

_____ All 3 Hospitality Events x **\$50.00/package** = \$ _____

_____ Individual Hospitality Events x **\$20.00/ticket** = \$ _____

Indicate which event you would like to attend:

1. Welcome Reception _____

2. Post Skills After party _____

3. Hall of Fame Awards Ceremony _____

Processing Fee = \$ **\$6.00**

Total Due = \$ _____

Date of Order: ____/____/____
 Month Day Year

Contact Name: _____ Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (W) (____)____-____ (H) (____)____-____ (Cell) (____)____-____

(Fax) (____)____-____ E-Mail: _____ Birthdate: ____/____/____
 Month Day Year

PAYMENT INFORMATION

Enclosed is my check or money order # _____ in the amount of \$ _____
Please note: Returned checks due to non-sufficient funds will be subject to a \$25, per occurrence, service charge.

Please charge my credit card in the amount of \$ _____

Credit Card Information: Type (circle one): Visa MasterCard American Express

Account # _____ Exp. Date ____/____
 Month Year

*CVV # _____ Cardholder Name: _____
 *This is the last 3 digit # that appears on the signature panel on the back of your Visa/Mastercard or the 4 digit # on the front of the AMEX card.

Cardholder Signature: _____

ALL TICKET PAYMENTS ARE NON-REFUNDABLE.

Please Return This Form Along With Payment to:

Portland Pirates Tickets • 94 Free Street • Portland, ME 04101
 Facsimile: (207) 773-3278 • Phone: (207) 828-4665 x350