

2014-2015 SAMFORD EMPLOYEE ATHLETICS TICKET POLICY AND REGISTRATION FORM

- You will need tickets for Football, Men's and Women's Basketball, and Baseball. All other sports (Volleyball, Soccer, Softball, Track and Field, Tennis, and Golf) will not require tickets.
- Any Samford Employee can receive two (2) complimentary tickets for any ticketed athletics event by presenting their Samford ID to Samford Athletics Ticket Office Staff at the designated Employee Will Call location.
- You may also receive any number of additional tickets that you need to gain admission for all dependents in your household. To obtain additional tickets, complete this registration form and turn it in to the Samford Athletics Ticket Office to receive a numerical sticker for your Samford Employee ID. This number will indicate to Samford Athletics Ticket Office staff the number of tickets you are registered to receive for all ticketed athletics events.
- The Samford Employee must present their ID at the Employee Will Call location on game day to obtain tickets. Tickets cannot be obtained prior to game day and employees cannot give their ID to a family member (registered or unregistered) to obtain tickets on their behalf.
- This policy only provides tickets for regular-season home games held on campus. You will not be able to obtain complimentary tickets for post-season, tournament, or neutral site contests.
- You will not be able to request a specific seat or seating area with your complimentary tickets. ALL EMPLOYEE TICKETS WILL BE GENERAL ADMISSION SEATING. Season tickets for reserved seating can be purchased at a discounted rate through the Samford Athletics Ticket Office.
- The policy may be modified to meet the needs of the management of an athletic event at any time.

If you have any questions about this policy or any unique circumstances that might require accommodation, please contact Michael McGreevey, Assistant Director of Athletics at (205) 726-4351 or mmcgreev@samford.edu

EMPLOYEE INFORMATION

Name: _____ Title: _____

Department: _____ SU Phone Number: _____

FULL NAME	AGE	RELATIONSHIP
1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____
5)	_____	_____
6)	_____	_____
7)	_____	_____
8)	_____	_____
9)	_____	_____

I certify that the family members listed above are my dependents and are therefore eligible to receive complimentary Samford Athletics Tickets. I understand that I am only to use my complimentary tickets to provide admission for those individuals listed here and if found to be abusing this privilege, I will be subject to losing my Samford Employee tickets under this policy.

EMPLOYEE SIGNATURE

DATE