

Student Union Box Office
 Agreement to Sell Tickets

This is an Agreement between the Sponsor, _____
 _____ (organization)

and the Seller, Student Union Box Office, Wright State University, Dayton, Ohio. The

Seller hereby agrees to sell tickets for the Sponsor to _____
 _____ (event)

beginning on _____ and continuing through _____
 _____ (date) _____ (date)

and contingent upon the following terms:

1. It is the Sponsor's responsibility to provide Seller with tickets and an itemized list of the tickets provided, prior to beginning sale date;
2. Sponsor must complete and deliver to Seller a Student Union Box Office Event Data Sheet. Seller shall be harmless from any and all loss of funds resulting from misinformation from the Sponsor;
3. Seller will not issue any refunds. Any patron seeking a refund will be referred to the Sponsor;
4. It is the Sponsor's responsibility to pick up any unsold tickets within two (2) days from the "Ending Sale Date" as indicated by Sponsor on Student Union Box Office Event Data Sheet;
5. Seller will mail Sponsor a check or electronically transfer funds for proceeds from sales only after "Ending Sale Date" as indicated by Sponsor on Student Union Box Office Data Sheet. Seller will not be held responsible for any delay of said check caused by the University's Financial Services Department; and
6. The Sponsor agrees to all the policies of the Seller. Any violation of these policies will mean cancellation of service.

<input type="checkbox"/> Seller:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Sponsor:	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Org. Name:	<input type="checkbox"/> _____
<input type="checkbox"/> Student Union Box Office	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Contact Name:	<input type="checkbox"/> _____
<input type="checkbox"/> Wright State University	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Org. Address:	<input type="checkbox"/> _____
<input type="checkbox"/> 186 Student Union	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Phone:	<input type="checkbox"/> _____
<input type="checkbox"/> 3640 Colonel Glenn Hwy	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Fax:	<input type="checkbox"/> _____
<input type="checkbox"/> Dayton, OH 45435	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Email:	<input type="checkbox"/> _____
<input type="checkbox"/> Phone: 937-775-5544	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Fax: 937-775-5527	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

Signed and agreed upon this _____ day of _____, _____, Dayton, OH 45435.

Fund _____ Org _____ Prog _____