

Student Union Box Office
Event Data Sheet

Name of Event _____

Sponsor of Event _____

Address _____

Contact Person _____ Phone Number _____

Day(s) & Date(s) of Event: M T W R F S Su _____ Time _____ am pm

Location _____

Beginning Sale Date _____ Ending Sale Date _____

Brief Description of Event _____

Ticket Information

Type of I.D. required _____ # of Tickets allowed per I.D. _____

Special Discounts to _____

Price: General Public _____ WSU Students _____ Faculty/Staff _____ Other Students _____

Children _____ (age range _____) Alumni _____ Over 55 _____

Types of Payment Accepted Cash _____ Mastercard _____ Visa _____ Discover _____

Check _____ WOC flex _____ + 3% = _____

Types of Orders Accepted Walk-up _____ Mail _____ Phone _____ Fax _____

of Tickets Issued to Seller Regular _____ (# _____ - _____)

Seating for People with Disabilities _____

Transportation

Type of Transportation _____ Is Round Trip Transportation Required? _____

Number of Wheelchair Seating Provided _____ Departure Location _____

Departure Time _____ Expected Time of Return _____

Special Considerations/Comments _____

Fund _____ **Org** _____ **Prog** _____