



2009 GYMNASTICS CHAMPIONSHIPS

NATIONAL COLLEGIATE • MINNEAPOLIS

**AT THE UNIVERSITY OF MINNESOTA SPORTS PAVILION
APRIL 16-18, 2008**



NCAA MEN'S GYMNASTICS CHAMPIONSHIP GROUP (15+) ORDER FORM

NAME: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP CODE: _____

PHONE (DAY) _____ EMAIL _____

MUST ORDER A MINIMUM OF 15 TICKETS

OF TICKETS (\$5) NATIONAL QUALIFIER SESSION I (4/16 1PM) _____

OF TICKETS (\$5) NATIONAL QUALIFIER SESSION II (4/16 7PM) _____

OF TICKETS (\$5) TEAM FINALS AND ALL AROUND FINALS (4/17 7PM) _____

OF TICKETS (\$5) INDIVIDUAL EVENT FINALS (4/18 7PM) _____

TOTAL INDIVIDUAL TICKETS _____ TOTAL AMOUNT DUE (+ \$4 HANDLING FEE): _____

MY CHECK, PAYABLE TO THE UNIVERSITY OF MINNESOTA, IS ENCLOSED

CREDIT CARD: MASTERCARD VISA AMEX DISCOVER

CARD NUMBER: _____ EXP. DATE: _____

SIGNATURE: _____

PLEASE MAIL TO ATHLETIC TICKET OFFICE 4 OAK STREET SE , MPLS, MN 55455 OR FAX 612/625-0003

WWW.GOPHERSPORTS.COM