



PROSPECTIVE CLUB SEAT LICENSE HOLDER APPLICATION

Date: \_\_\_\_\_

Circle One: CORPORATE Account OR INDIVIDUAL Account

PLEASE PRINT

Name: \_\_\_\_\_ Date of Birth (Optional): / /

Company: \_\_\_\_\_

Street / Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

I wish to purchase \_\_\_\_\_ (#) CLUB SEATS.

Term: [ ] Five (5) Years [ ] Three (3) Years [ ] Two (2) Years

Agreement requires a non-refundable payment of \_\_\_\_\_ X \$ \_\_\_\_\_ = \$ \_\_\_\_\_
# SEATS PRICE PER SEAT ANNUAL COST TOTAL DEPOSIT

Payment Schedule: \_\_\_\_\_

Method of Payment (Check One): [ ] Cash [ ] Check [ ] Credit Card

Credit Card Type: [ ] Visa [ ] MasterCard

Name on Card (please print): \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Checks are to be made payable to: Chevrolet Centre

\_\_\_\_\_  
PURCHASER

\_\_\_\_\_  
GEMS REPRESENTATIVE