

# METLIFE STADIUM GROUP TOURS | GROUP SALES ORDER FORM

T- 201.559.1700 E- tours@MetLifestadium.com



Form must be filled out completely and signed or order will not be accepted. Please return via email.

Requested Date: \_\_\_\_\_ Requested Time: 10am\_\_\_ 1pm\_\_\_ 4pm\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Group Name: \_\_\_\_\_

Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

# of Tickets (10+)	Type of Ticket	Price of Ticket	Total Cost (# of tickets x cost)
	<b>Adult</b>	<b>\$20</b>	
	<b>Kids</b> (5-12 years old)	<b>\$15</b>	
	<b>Seniors</b> (60 years old+)	<b>\$15</b>	
	<b>Kids</b> (4 years and under)	<b>FREE</b> (with purchase of adult ticket)	
		<b>Service &amp; Handling Fee</b>	<b>\$10</b>
		<b>TOTAL:</b>	

**Group Sales Guidelines:** To reserve group tickets, please complete this form and return via email. The number of tickets purchased per event must be 10 or more to be eligible as a group ticket purchase. Payment must be received two (2) weeks (or 14 business days) prior to tour. Up to ten (10) additional tickets can be purchased day of tour; cash or credit card accepted. There are no full or partial refunds or exchanges. **All Sales are Final.** Please specify any ADA needs at the time the tour is booked. Tours are subject to change or cancellation at any time as per stadium policies. All tour locations based on availability.

## METHOD OF PAYMENT:

### CHECK

Check #: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_

**Please make all checks payable to: New Meadowlands Stadium Company, LLC**

Personal/business checks will be accepted for only 14 business days before tour date. Following, only cash or credit card is accepted.

### CREDIT CARD

Card Type (Check One): MasterCard\_\_\_ Amex\_\_\_ Visa\_\_\_ Discover\_\_\_

Amount to be Charged: \$ \_\_\_\_\_

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

**Authorization:** This signature and date authorizes credit card charge; accepts all group ticket guidelines; and accepts responsibility for payment in full on tickets purchased.

### OFFICE USE ONLY:

**Do Not Fill in Credit Card Info! We will call you to obtain it.**

Account # \_\_\_\_\_ CC#: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Exp.: \_\_\_\_\_ Code: \_\_\_\_\_ Zip: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Notes: \_\_\_\_\_