



2024 TICKETS REQUEST

School/Organization Name: _____

Program/Team/Club: _____ # Students: _____

Mailing Address: _____

City: _____ Zip: _____ Fundraising Goal \$ _____

Contact Name: _____ Title: _____

Email: _____ Phone: _____

Requested # Tickets: _____ **X \$12 = Security Deposit \$** _____

() Check # _____

() Credit or Debit Card _____

Name on Card _____

Exp ____ / ____ CCV _____ Billing Zip _____

(OCADA to complete) Tickets Provided _____ Initials _____

.....

_____ agrees to return all un-sold tickets and all funds raised through ticket sales to OCADA by **October 1, 2024**. The value of the un-sold tickets (\$12 each) plus the funds submitted must equal the original deposit amount. If it does not, funds will be deducted from program's total to make up the difference. For example, if 100 tickets are requested a security deposit of \$1,200 will be made. Program must return to OCADA a combination of un-sold tickets plus funds that equals \$1,200. For example, 60 tickets sold (\$720) + 40 un-sold tickets (\$480) = \$1200. **OCADA will not deposit the check or charge the credit card unless funds/tickets equaling the full value of tickets requested are not returned to OCADA by the **October 1, 2024 deadline**.**

Total funds will be distributed to organization within 2 weeks of show closing.

For Organization/Team/Club:

Orange County Auto Dealers Association:

Signature

Signature

Date

Date