



500 Montgomery St. Ste. 400 Arlington, VA 22214 Tel: 202-930-3533

Email: sales@getlimetickets.com

Website: www.getlimetickets.com

Tailgate Party Contract

Date of Event: _____

Name of Event: _____

(i.e. Jets vs. Ravens Game)

Time of Event: _____ Number of Guests: _____ ppl

Price of Event: _____

CONTACT INFORMATION:

Contact Name: _____

Phone: _____ Fax: _____ Cell: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Email: _____

DEPOSIT/PAYMENT/CONFIRMATION INFORMATION:

A \$###.00 DEPOSIT WILL BE CHARGED TO ACCOUNT UPON RECEIVING SIGNED CONTRACT. DEPOSIT WILL BE CREDITED TO THE BILL. ALL PAYMENTS DUE ON ##/##/##. *Confirmation of head count due 7 days prior to the event or the approximate number will be used as a guaranteed. Menu attached.*

CREDIT CARD #: _____ Expiration Date: _____

TYPE: (Circle one) **Visa MasterCard American Express Discover Diners Club**

Name on Card: (Please print) _____

This will be considered a definite upon receipt of signed contract and deposit.

X _____ DATE SIGNED CONTRACT: _____

(Client Signature)

Please return this agreement to sales@getlimetickets.com.

THANK YOU FOR CHOOSING LIME FOR YOUR TAILGATING EXPERIENCE!