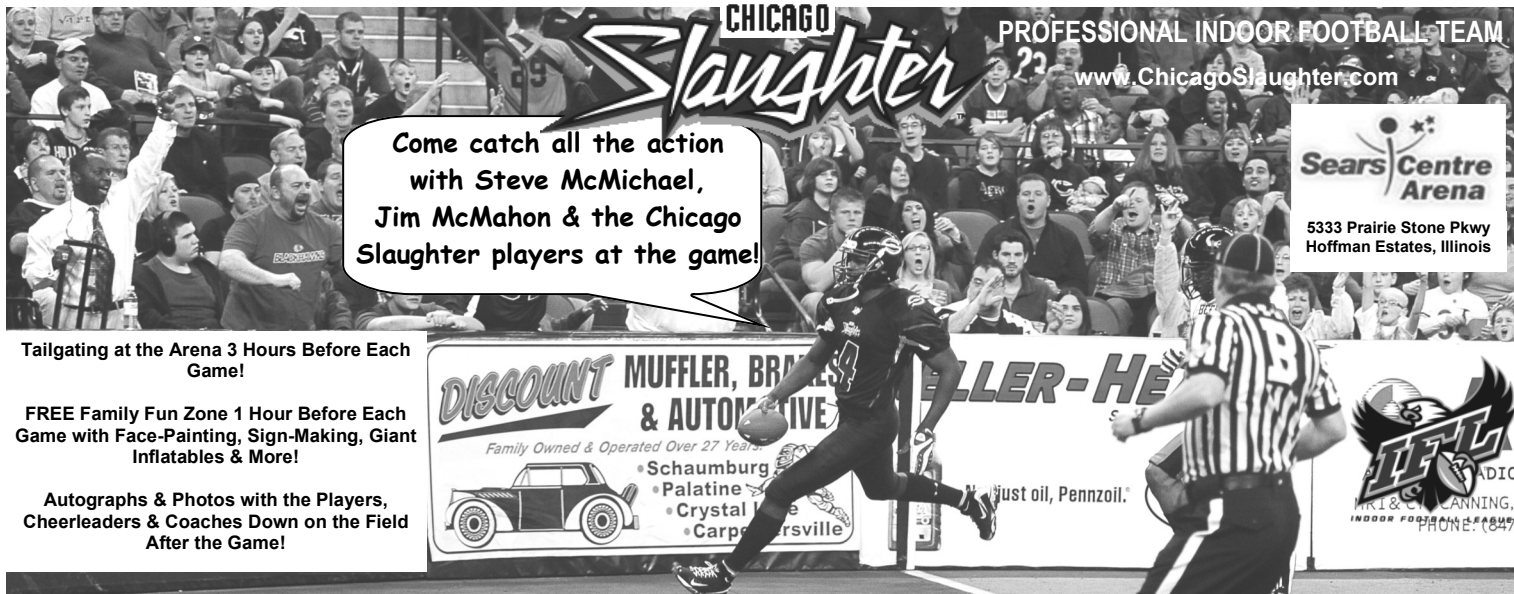


CONGRATULATIONS!

TRI CITY CHARGERS ACADEMIC EXCELLENCE PROGRAM



Come catch all the action with Steve McMichael, Jim McMahon & the Chicago Slaughter players at the game!

Tailgating at the Arena 3 Hours Before Each Game!

FREE Family Fun Zone 1 Hour Before Each Game with Face-Painting, Sign-Making, Giant Inflatables & More!

Autographs & Photos with the Players, Cheerleaders & Coaches Down on the Field After the Game!

Valid only on the following date(s): April 29th, 7:35pm; May 14th, 7:05pm; June 4th, 7:05pm

To receive your free Slaughter ticket, follow the instructions below:

- Fill out the ticket order form below. Additional tickets for family or friends may be ordered on the same form. All seats will be located together.
- MAIL, FAX, or CALL to place your order.

Mail to: Chicago Slaughter 1055 W. Golf Rd. Hoffman Estates, IL 60169

Fax to: 847-310-3199 Call: 847-310-3190

No cash value. Tickets based on availability. Cannot be combined with any other offer. For best seats, please return your order form at least 2 weeks before your selected game date. Orders are NOT accepted at the Sears Centre Box Office. Children 2 and under are free when sitting on an adult's lap. Tickets will be held at will-call, unless you choose to pay the mail fee below. Orders received less than 7 days before the game will not be mailed to you and will be held at will-call.

Tri-City Chargers Academic Excellence

Please select **ONLY ONE** Price Level Below:

Upper Level Endzone

 1 FREE GAME TICKET = FREE

 # of Additional Tickets @ \$8.00/ticket (includes \$1 Sears Centre Facility Fee) =

OR

Lower Level Endzone

 1 UPGRADE MY FREE TICKET = \$2.00

 # of Additional Tickets @ \$10.00/ticket (includes \$1 Sears Centre Facility Fee) =

OR

Lower Level Sidelines (Rows 6-19)

 1 UPGRADE MY FREE TICKET = \$7.00

 # of Additional Tickets @ \$15.00/ticket (includes \$1 Sears Centre Facility Fee) =



SUBTOTAL from your selected price level above =

Mail charge = \$2.00

GRAND TOTAL =

Date of Game _____

Method of Payment (circle one)

Check made payable to Chicago Slaughter

Visa Mastercard AMEX Discover

Credit Card Number _____

Exp. Date _____ CVV _____

Name _____

Address _____

City _____ Zip _____

Phone _____

Email _____

(Providing an email address is RECOMMENDED)