



VIRGINIA TECH COMPLIMENTARY TICKET REQUEST FORM



This request must be approved and signed by the athletic director or someone authorized by the athletic director. University policy **prohibits any exception** to this requirement. **If approved you should indicate if you will pick up the tickets or whether the ticket office should mail the tickets to the address listed below.** Do not use this form to request tickets authorized in the athletic department policy and procedure manual.

When you submit this request it is **your responsibility to provide the social security number and address of any recipient and inform them** that they will be taxed on the value of the tickets for any event that is sold out, in compliance with mandated IRS guidelines. If no S.S.# is supplied then the request will not be filled.

Person Requesting tickets (Please Print) **Telephone #** **Signature**
Date of Request _____

Circle events your are requesting tickets for: Football Men's BB Women's BB Other: Specify

Game*	# of Tickets	Recipient	Address	SSN	Reason for comps
*If your are requesting season tickets write season in this column.					
Approved	Athletic Director or authorized designee		Date		