PRINCETON
ATHLETICS TICKET
DONATION REQUEST
FORM

Note: NCAA regulations prohibit ticket or item donations to any group or cause where proceeds will
directly or indirectly benefit individuals between 9-12th grade

Contact __________________________________组织 __________________________________
Address __________________________________ City/State/Zip _________________________
Phone ___________________________ Fax __________________________ Email _______________________
Sport _______________________ Date and Opponent of Ticket Request __________________________

Have you received tickets from Princeton before: ☐ Yes ☐ No

Classify the beneficiary of the request:
☐ Nonprofit/Charitable Organization ○ Personal Use
(Please attach copy of 501(c)(3)) ○ Other (please describe) _______________________
☐ Educational/Scholastic Entity ○ Other (please describe) _______________________
☐ Youth Program (8th grade or below)

Event Information (if not for personal use)
Event Summary __________________________________________________________
__________________________________________________________
Date ___________ Location ________________________________________

Type of Event:
☐ Fundraiser
☐ Auction
☐ Promotion
☐ Other

By signing this form, I acknowledge that I understand that Princeton University is under no obligation to
fulfill this request.

Signature: ________________________________ Date: ______________________

Donation requests need to be emailed to athticket@princeton.edu, or mailed to:
Princeton Athletics
Ticket Office
PO Box 71
Princeton, NJ 08542 - 00701

For Internal Use Only

Approved: ☐ Yes ☐ No

Request Filled: ☐ Date: ______________

Donation Supplied by Athletics: ________________________________