

Check if interested:

I am interested in being a host family

I am interested in belonging to the Rhino Booster Club



## 2007-08 WSHL THORNE CUP LEAGUE CHAMPIONS 2006-07, 2007-08, & 2008-09 MID-WEST CONFERENCE CHAMPIONS 2007, 2008, & 2009 NATIONAL TOURNAMENT 2010-11 Season Ticket Holder Agreement

A	 THE RESE	ILIES	MATION
-		INECIPI	MAIICIN

Name:	Company:			
Mailing Address:	City:		State:Zip:	
Day Phone:	Night Phone:		Fax:	
E-mail address:				
RESERVED TICKET PRICING				
	SEASON PRICE	SUMMER PI (Good through Se		SPRING PRIC (Good through July
Glass Seats – Only Two Rows	\$325.00			\$200.00
Orange Section – Center Ice	\$235.00	\$210.00		
Grey Sections – Blue Lines	\$210.00	\$185.00	·	
Black Sections – Goal Lines	\$185.00	\$160.00		
EPHA/SCB Youth Participant – (any section)	\$80.00	\$60.00		\$40.00
Rhino VIP Parking Pass	\$120.00	\$115.00	\$110.00	
**EPHA/SCB Youth Participant Season Ticket does not qua	alify for the Referral program			
Section: Ro	ow.	Seat(s):		
<ul> <li>MUST BE HUNG ON THE INSIDE MI</li> <li>Purchase six (6) Section I season ticket</li> <li>Purchase four (4) Glass Seats season tic</li> <li>To view parking lot grid please visit wy</li> <li>Rhino VIP Patio located ice level in the</li> <li>This season the El Paso Rhinos are offer and your card will be debited each may payment plans must be completed by the</li> </ul>	s and receive a FREE parking ckets and receive a FREE park ww.elpasorhinos.com  SPECIAL VIP RHINE Northeast corner of the Event PAYMENT PLANS A Pering payment plans. Please chaonth. Two payment plans are first home game of the season RHINO VIP CA	ing pass  O PATIO s Center, with its own covalLABLE toose your plan below. It is available: Three (3) on ARD	Fill out the credit month plan – Si	card information below x (6) month plan.
All Season Ticket holders will receive a	a Rhino VIP Card. Card beare  METHOD OF PAY		io Merchandise ai	nd EPHA programs.
Amount Due:	Amount Paid:		Balance:	
Check Cash	Credit Card	Payment Plan (3)	Payment Pla	
	'ard #:	•	-	Date:
Signature:			_	e:
Referred By:	Name		Pho	one Number

Mailing Address:

El Paso Rhinos 4100 E Paisano, 79905

Fax: 915-313-7964