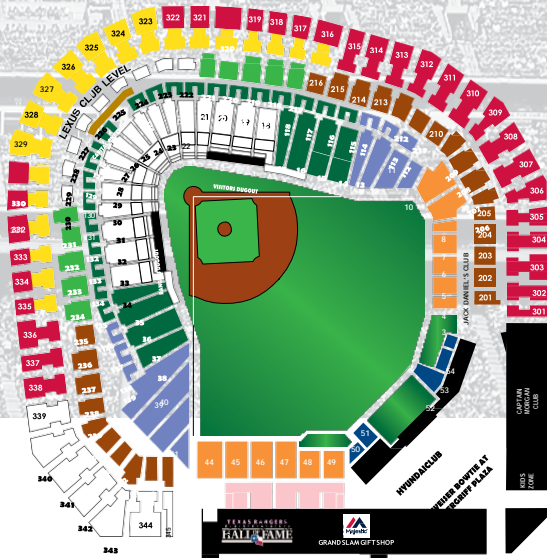




GROUP ORDER FORM

APRIL						
SUN	MON	TUE	WED	THU	FRI	SAT
					NYM	NYM
					HOU	HOU
	OAK	OAK	OAK	OAK	SEA	SEA
HOU	LAA	LAA	LAA	SEA	LAA	LAA
SEA		ARZ	ARZ			
LAA	SEA	SEA	SEA			
MAY						
SUN	MON	TUE	WED	THU	FRI	SAT
				OAK	OAK	
OAK	HOU	HOU	HOU	TB	TB	TB
TB	KC	KC	KC	CLE	CLE	CLE
CLE		BOS	BOS	NYN	NYN	
NYN	CLE	CLE	CLE	BOS	BOS	BOS
BOS						
texasrangers.com 972-RANGERS						
JUNE						
SUN	MON	TUE	WED	THU	FRI	SAT
		CWS	CWS	CWS	KC	KC
KC		OAK	OAK	OAK	MIN	MIN
MIN	LAD	LAD	LAD	LAD	CWS	CWS
CWS		OAK	OAK	OAK	TOR	TOR
TOR	BAL	BAL				
SCHEDULE SUBJECT TO CHANGE						
JULY						
SUN	MON	TUE	WED	THU	FRI	SAT
			BAL	BAL	LAA	LAA
			ARZ	ARZ	SD	SD
LAA			SD	SD	HOU	HOU
SD			COL	COL	LAA	LAA
HOU	COL	COL	COL			
LAA	NYN	NYN	NYN	NYN	SF	
AUGUST						
SUN	MON	TUE	WED	THU	FRI	SAT
						SF
SF	HOU	HOU	HOU		SEA	SEA
SEA		MIN	MIN	TB	TB	TB
TB	SEA	SEA	SEA	DET	DET	DET
DET		TOR	TOR	TOR	BAL	BAL
BAL	SD					
SEPT/OCT						
SUN	MON	TUE	WED	THU	FRI	SAT
			SD	SD	LAA	LAA
LAA	SEA	SEA	SEA	SEA	OAK	OAK
OAK	HOU	HOU	HOU	HOU	SEA	SEA
SEA		OAK	OAK	OAK	HOU	HOU
HOU	DET	DET	DET	DET	LAA	LAA
LAA						



GROUP Pricing Key

- Mon/Tues Group Games
- Wed/Thu Group Games
- Standard Weekend Group Games
- Marquee Group Games

LOCATION	GATE PRICE	PREMIER GATE PRICE*	MON/TUE GROUP PRICE	WED/THU GROUP PRICE	STANDARD WKND GROUP PRICE	MARQUEE GROUP PRICE
Lexus Club Box	\$66	\$73	\$42	\$45	\$51	\$66
Lower Box	\$64	\$71	\$41	\$44	\$50	\$65
Cholula Porch	\$48	\$53	\$36	\$38	\$42	\$49
Corner Box	\$46	\$51	\$30	\$32	\$35	\$43
Outfield Plaza	\$34	\$37	\$20	\$23	\$25	\$30
Lower Reserved	\$34	\$37	\$20	\$23	\$25	\$30
Lexus Club Terrace	\$31	\$34	\$18	\$19	\$20	\$25
Upper Box	\$24	\$26	\$13	\$14	\$15	\$20
Upper Reserved	\$17	\$19	\$11	\$12	\$13	\$15

*2015 PREMIER GAMES: April 10-April 12, May 2, 16, 28-31, June 13, 15-16, July 3-4, 11, 27-31, August 1-2, 15, 29, September 12, 19, October 2-3

GENERAL INFORMATION

Game Date: September 11, 2015

Group Name: State Employee Charitable Campaign

Group Leader (if applicable): N/A

Account # (if applicable): N/A

of Tickets You Would Like to Purchase: _____

Cost of Ticket(s): \$ _____

DELIVERY INFORMATION

- ☐ Please Email My Ticket(s):
Email Address: _____
- ☐ Please Leave My Ticket(s) at Will Call Window (First base ticket office, must have picture ID):
Name for Will Call: _____
- ☐ Please Mail My Ticket(s) (Tickets cannot be mailed within 10 days of the game date):
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Daytime Phone: _____

PAYMENT INFORMATION

Make checks payable to Texas Rangers Baseball Club

Name: _____

Charge my (Check one): ☐ Visa ☐ MC ☐ Amex ☐ Discover

Card #: _____ Exp: _____

3 Digit Security Code: _____ Billing Zip: _____

Signature: _____

_____ Section 336

_____ Section 245

**** Other Sections – Call Nate Devlin 817 273-5225**

GROUP SALES REP

EMAIL OR MAIL COMPLETED ORDER FOR TO YOUR ASSIGNED REP

☐ Nate Devlin//ndevlin@texasrangers.com // 817 273-5225

Texas Rangers, ATTN: Group Sales
1000 Ballpark Way Ste. 400, Arlington TX 76011

FOR MORE INFORMATION OR QUESTIONS PLEASE CONTACT JAMIE ROBERTS, GROUP SALES MANAGER at jroberts@texasrangers.com or 817-436-5979