



808 N. 13th Street  
 Omaha, NE 68102  
 P 402.554.4422  
 F 402.554.4433  
 cwsomaha.com

# SEAT RELOCATION & ADDITION REQUEST FORM

Beginning on July 9, season-ticket holders who wish to request a change in seat location or additional seats -- effective for the 2019 College World Series -- should complete this form in its entirety and return it to College World Series of Omaha, Inc., no later than Friday, August 17, 2018.

## RELOCATION PROCESS

1. Seats used for relocation come from season-ticket holder non-renewals. Because of this, your season tickets will need to be renewed by the February 1, 2019, deadline to be considered for relocation.
2. Requests are reviewed in order of season-ticket seniority: the number of years season tickets have been purchased from CWS of Omaha, Inc. Requests are NOT reviewed in the order they are returned. No late submissions will be accepted.
3. Submitting a request form does not guarantee a change in seat assignment.
4. Due to the renewal process, it is likely that you may not receive a response to your request until the middle of March, 2019.
5. All transactions will be handled in consultation with the season-ticket holder before any relocation is processed.

Please submit this request form to the attention of Carol Foreman, Ticket Manager:

### MAIL

College World Series of Omaha, Inc.  
 808 N. 13th Street  
 Omaha, NE 68102

### EMAIL

carol@cwsomaha.com

### FAX

(402) 554-4433

To ensure proper identification, please provide either your account number, account name AND address:

1. Account Number (as you received it on your 2018 Invoice): \_\_\_\_\_

2. Account Name: \_\_\_\_\_  
 (name under which your account is listed)

3. Company Name: \_\_\_\_\_  
 (if needed)

4. Account Address: Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## CONTACT INFORMATION

To expedite the relocation process, please provide us with the best way of contacting you, during normal business hours, to review proposed options.

1. Email Address: \_\_\_\_\_@\_\_\_\_\_

2. Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

>>For any questions regarding this process, please contact Carol Foreman:

PHONE: (402) 554-4422 x 13 EMAIL: carol@cwsomaha.com

Please use the following section to provide us with information that will help in the relocation process.

SEAT LOCATION(S) of those tickets you currently purchase that you wish to have changed:

Sec.: _____	Row: _____	Seat(s): _____		Sec.: _____	Row: _____	Seat(s): _____
Sec.: _____	Row: _____	Seat(s): _____		Sec.: _____	Row: _____	Seat(s): _____
Sec.: _____	Row: _____	Seat(s): _____		Sec.: _____	Row: _____	Seat(s): _____

In the space below, please provide detailed information on your requested relocation. In order to provide the best possible options, include priorities or options that might better help fulfill your request. For example, note that you might be willing to split up seats or move to another section. Please understand that in order to fulfill your request, a seat must be vacated. Our renewal rate is very high, so selection is limited.

DETAILED REQUEST:

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### ADDITIONAL SEATS

I WOULD LIKE TO PURCHASE ADDITIONAL SEATS:

Note: You may only request additional seats if you currently purchase fewer than four tickets. You may only purchase enough tickets to reach four total tickets. For example, if you currently purchase two tickets, you may request up to two more seats. A request for additional seats also might include a change of location. You will be notified of the move before any change is completed.

CHECK THE BOX THAT DESIGNATES HOW MANY ADDITIONAL TICKETS YOU ARE REQUESTING:

1       2       3

PLEASE PROVIDE ANY ADDITIONAL NOTES IF NECESSARY:

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FOR INTERNAL USE ONLY

DATE RECEIVED: \_\_\_\_\_

NOTES: \_\_\_\_\_

SENIORITY YEAR: \_\_\_\_\_