



Loge Area  
 The first three  
 rows of Upper Level  
 extending from aisle  
 325 through 332



# ATLANTA BRAVES, INC.

P. O. BOX 1122 ATLANTA, GEORGIA 30301

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## 1966 SEASON TICKET APPLICATION

**PLEASE TYPE OR PRINT**

Name (Individual or Company) \_\_\_\_\_

Street Address or P. O. Box No \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Company Representative \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_ Tel. No. \_\_\_\_\_

**DO NOT WRITE IN THIS SPACE**

Level:  Club  Dugout  Field  Loge

Aisle: \_\_\_\_\_

Row: \_\_\_\_\_

Seats: \_\_\_\_\_

I desire to purchase the following baseball season tickets in Atlanta Stadium for the 1966 baseball season. My seating preference is indicated below.

CLUB LEVEL		DUGOUT LEVEL		FIELD LEVEL		LOGE LEVEL	
Number	Area	Number	Area	Number	Area	Number	Area
_____	First Base	_____	First Base	_____	First Base	_____	First Base
_____	Third Base	_____	Home Plate	_____	Home Plate	_____	Home Plate
_____	Third Base	_____	Third Base	_____	Third Base	_____	Third Base
No. Tickets	@ \$375.00	No. Tickets	@ \$375.00	No. Tickets	@ \$250.00	No. Tickets	@ \$250.00
Total \$	_____	Total \$	_____	Total \$	_____	Total \$	_____

Enclosed is a check covering full payment for the above ordered 1966 season tickets.

I agree to remit upon receipt of invoice.