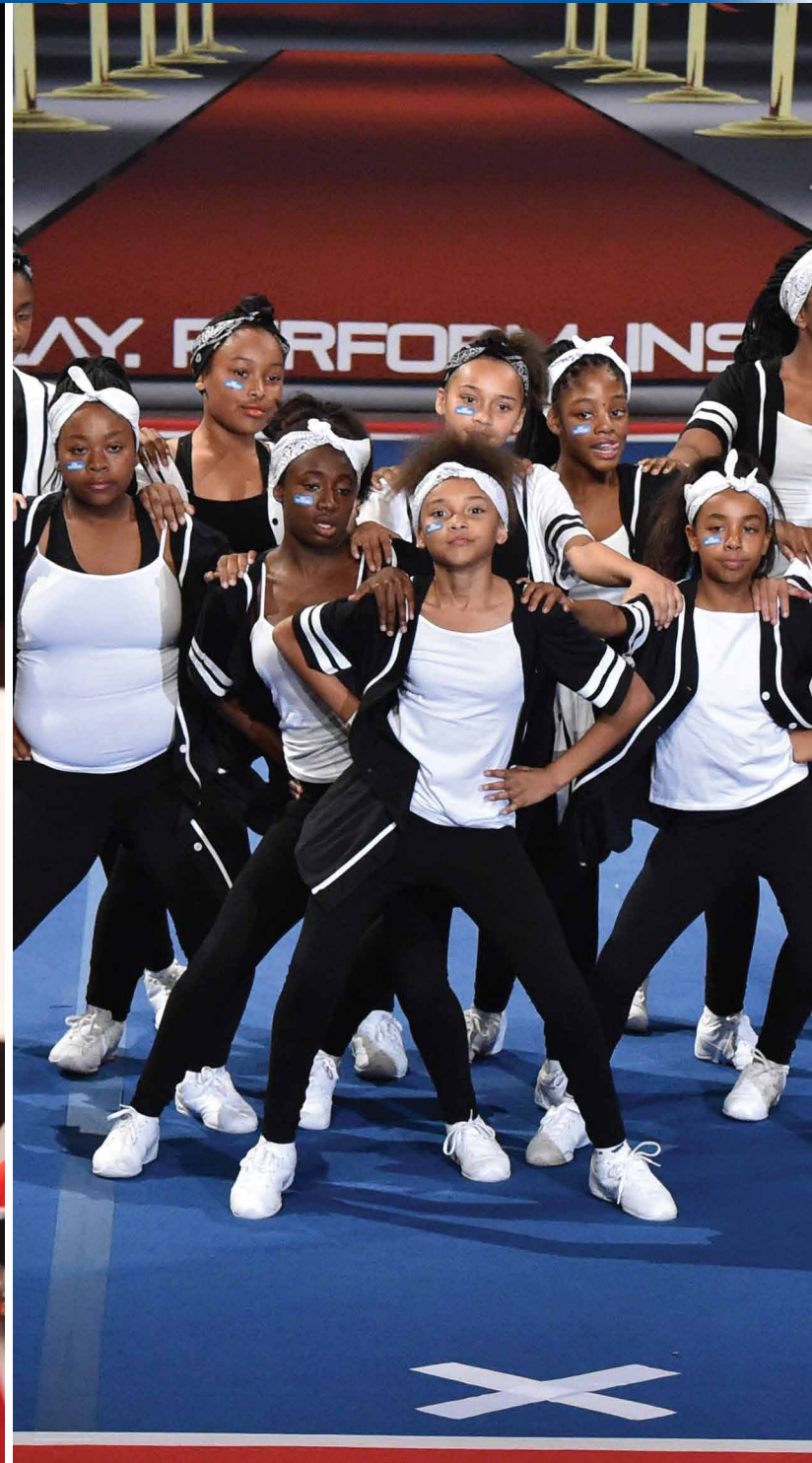


# JAMZ CHAMPIONSHIP

## FALLFEST CLASSIC

SUNDAY, NOVEMBER 12, 2017

SIX FLAGS DISCOVERY KINGDOM | VALLEJO, CA



(800) 920-4272 | CHAMPIONSHIPS@JAMZ.COM | www.jamz.com



# JAMZ CHAMPIONSHIP

## FALLFEST CLASSIC

### HOW TO REGISTER

- Complete your online registration (register.jamz.com)
- Fill out the Credit Card Payment form
  - Email to: registration@jamz.com
  - Send to: PO box 4308, Modesto CA 95352
  - Or Fax it in to: (209)578-1617
- If you are pre-purchasing Spectator Passes – Fill out and fax that form to (707)556-5217

### COACH TICKETS

One complimentary (coach/advisor) ticket will be given for each Entry Form. If you have more than one team, submit an entry form for EACH team. Any additional coach/advisor tickets must be purchased as spectator tickets. **Coach/advisor tickets and wristbands will be mailed prior to event.**

### SPECTATOR TICKETS

Spectator tickets will be available for \$40.55. We recommend ten days advanced payment to allow time for ticket fulfillment. This will eliminate unnecessary delays on championship day. Use the Six Flags Discovery Kingdom Championship Spectator Pre-Order Form to purchase spectator tickets in advance. Ticket-only orders will be held to a 10-ticket minimum. JAMZ Spectator Tickets will also be available the day of the event. Look for ticket window specifying JAMZ Tickets. All tickets purchased through this offer will receive a wristband allowing championship access.

### CANCELLATION POLICY

All payments are non-refundable and non-transferable. If a participant cancels (regardless of the reason) you cannot apply that person's payment to another team. However, if a participant cancels from your registration and you replace that participant with a new participant for your team, you can use the payment of the first participant towards the new.

**\*\*Rain or Shine – No Park Refunds. Six Flags Discovery Kingdom tickets will be valid through end of year if not used.**

Join us for a day of exciting thrills on and off the stage.

New This Year!!! Special All You Lunch available for JAMZ Guests ONLY!

Also available for purchase:

Discounted Haunted House Wristbands

Spectator Tickets

Discounted Parking

### OTHER

Call **Six Flags Discovery Kingdom Group Sales** for any questions concerning your ticket order or general park information.

- Phone 707.556.5216 OR Email [tiBaxter@sftp.com](mailto:tiBaxter@sftp.com)



1001 Fairgrounds Drive Vallejo, CA 94589

Send This form to JAMZ  
Email: Registration@jamz.com  
Mail: PO Box 4308 Modesto, CA 95352  
Fax: 209-578-1617

QUESTIONS  
ABOUT THIS FORM?

Call  
Six Flags Ticketing  
707-556-5216

\*\*Call Six Flags if  
requesting a Receipt

# CREDIT CARD PAYMENT JAMZ ENTRY - 2017

Championship Date: \_\_\_\_\_

Team Name: \_\_\_\_\_

Credit Card No: \_\_\_\_\_ Exp: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Security Code: \_\_\_\_\_

Amount Authorized: \_\_\_\_\_

Billing Address (of cardholder): \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_  
CARD HOLDERS SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
FOR FINANCE USE

\_\_\_\_\_  
DATE PROCESSED

\_\_\_\_\_  
APPROVAL CODE

\_\_\_\_\_  
CUSTOMER #

\*\*This Payment is processed by Six Flags Discovery Kingdom and may take up to 2 weeks to process.



DO NOT USE THIS FORM FOR ANY OTHER JAMZ EVENT. FAX THIS FORM TO SIX FLAGS GROUP SALES - 707.556.5217

CHAMPIONSHIP LOCATION: *Discovery Kingdom - Vallejo, CA*

CHAMPIONSHIP DATE:  Sunday 11/12

TEAM: \_\_\_\_\_

ADVISOR/COACH: \_\_\_\_\_

**ORDER INFO:**

HOME  WORK  GYM / STUDIO

All tickets will be mailed out via USPS.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DAYTIME PHONE: (      ) \_\_\_\_\_

CELL PHONE: (      ) \_\_\_\_\_

	Price x	Total #	= Amount
General Admission (minimum of 10 for an order)	\$40.55		
Wristbands ONLY (for season pass holders)	\$10.00		
	Processing Fee*	\$	8.99
	<b>TOTAL</b>	<b>\$</b>	

\*Processing fee is per order. Not applicable if submitted with team entry.

**PAYMENT:** Total Amount Due: \$ \_\_\_\_\_

CHECK Check # \_\_\_\_\_  
(One check per team ONLY)

CREDIT CARD:  VISA  M/C  AMEX  
(Full payment ONLY)

CARD #: \_\_\_\_\_

CARDHOLDER'S NAME: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_

CARDHOLDER'S SIGNATURE: \_\_\_\_\_

PHONE: (      ) \_\_\_\_\_

**FOR OFFICE USE ONLY**

DR \_\_\_\_\_ MOP \_\_\_\_\_ # \_\_\_\_\_ DE \_\_\_\_\_ IP \_\_\_\_\_ CFM \_\_\_\_\_ CC \_\_\_\_\_ ROS \_\_\_\_\_ WS \_\_\_\_\_



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