

MULLEN'S SPORTS ENTERPRISES, INC.
PO BOX 3092, Olathe, KS 66063-3092
PHO 913-515-2742 FAX 913-768-9819 (no cover sheet required)
E-MAIL kathy@mullensports.net EIN #48-1149118

Credit Card Payment Authorization (SUBSCRIBER RATES) KANSAS CITY (EVENTS)

Receipt of this form authorizes Mullen's Sports Enterprises, Inc. to process the credit card designated below for the sole purchase of admission/coaches packet(s) to the Men's Basketball 2016 **Kansas City** summer events @ Drive5 Sports Center, Overland Park, Kansas & New Century Field House, Gardner, KS

*ANY College Coach attending **MUST** purchase a packet –NO EXCEPTIONS*

Circle One: Visa MasterCard Discover American Express

CC number _____ - _____ - _____ - _____ Expiration Date ____ - ____

3 digit security code (back of card) _____ **PRINT** Name of cardholder _____

Cardholder Address _____ City _____ ST _____ ZIP _____

College/University _____

*** (Your **RENEWAL FORM** for the men's basketball scouting subscription 2016-2017 **MUST BE** on file to purchase packets at the **Subscriber** rate – please note we can bill and/or invoice at a later date)

\$ 75.00 **Mullen's Kansas City JC Showcase, Friday, July 8** (Blue Valley NW High School)
(**Single coach attending**) Coach's Name _____

125.00 **Mullen's Kansas City JC Showcase, Friday, July 8** (Blue Valley NW High School)
(**2 or more coaches attending-SAME COLLEGE**) Coaches Names _____;
_____; _____; _____

150.00 **Mullen's Midwest/Kansas City High Profile Team Tournament, Fri-Sun, July 8-10**
(**Single Coach attending**) Coach's Name _____

200.00 **Mullen's Midwest/Kansas City High Profile Team Tournament, Fri-Sun, July 8-10**
(**2 or more coaches attending-SAME COLLEGE**)--Coaches Names _____;
_____; _____; _____

75.00 (NCAA D3, NAIA II or junior college) **Mullen's Midwest/Kansas City High Profile Team Tournament,**
Fri-Sun, July 8-10 (**Single Coach attending**) Coach's Name _____

150.00 **Mullen's Top 100 JUCO Showcase, Sat & Sun, July 9-10** (Drive5 Sports Center)
(**Single coach attending**) Coach's Name _____

225.00 **Mullen's Top 100 JUCO Showcase, Sat & Sun, July 9-10** (Drive5 Sports Center)
(**2 or more coaches attending-SAME COLLEGE**) Coaches Names _____;
_____; _____; _____

Authorized Signature: _____

Dated: _____, 2016 Send receipt to (e-mail address) _____

Phone Number: (_____) _____

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Credit Card Payment Authorization (SUBSCRIBER RATES) DALLAS (EVENTS)

Receipt of this form authorizes Mullen's Sports Enterprises, Inc. to process the credit card designated below for the sole purchase of admission/coaches packet(s) to the Men's Basketball 2016 Dallas, Texas summer events @ McClure Athletic Complex & Uplift Hampton Preparatory, Dallas, TX

*ANY College Coach attending **MUST** purchase a packet -NO EXCEPTIONS*

Circle One: Visa MasterCard Discover American Express

CC number _____ - _____ - _____ - _____ Expiration Date ____ - ____

3 digit security code (back of card) _____ **PRINT** Name of cardholder _____

Cardholder Address _____ City _____ ST _____ ZIP _____

College/University _____

*** (Your **RENEWAL FORM** for the men's basketball scouting subscription 2016-2017 **MUST BE** on file to purchase packets at the **Subscriber** rate - please note we can bill and/or invoice at a later date)

150.00 **Mullen's Southwest/Dallas High Profile Team Tournament**, Fri-Sun, July 15-17 & **Mullen's Dallas JC Showcase**, Saturday, July 16 (**Single Coach attending**)
Coach's Name _____ **coaches packet includes both events

175.00 **Mullen's Southwest/Dallas High Profile Team Tournament**, Fri-Sun, July 15-17 & **Mullen's Dallas JC Showcase**, Saturday, July 16 (**2 or more coaches attending-SAME COLLEGE**)--Coaches Names _____; _____; _____;
**coach's packet includes both events

50.00 (**NCAA D3, NAIA II or junior college**) **Mullen's Southwest/Dallas High Profile Team Tournament**, Fri-Sun, July 15-17 & **Mullen's Dallas JC Showcase**, Saturday, July 16 (**Single Coach attending**)
Coach's Name _____ **coach's packet includes both events

Authorized Signature: _____

Dated: _____, 2016 Send receipt to (e-mail address) _____

Phone Number: (_____) _____