



ST. CLOUD ROX "PINCH HITTER CLUB" DONATION TICKET REQUEST

I/We wish to request Game Tickets from the St. Cloud Rox "Pinch Hitter Club" Program.

Charity Name or Cause _____

Contact Person _____

Contact Mailing Address _____

City/State/Zip Code _____

Purpose for Ticket Request _____

Charity Organization Day Phone _____

Contact Person Cell Phone _____

Contact Person E-Mail _____

Rox Baseball Game Date Requested _____

Number of Game Tickets Requested _____

When form is complete, please Scan & E-Mail to jeff@stcloudrox.com or mail to:

PINCH HITTER CLUB

Attn: Jeff Haag, Community Relations Dir.

St. Cloud Rox Baseball Club

P.O. Box 7216

St. Cloud, MN 56302