

**B27 Pro Entertainment**

33100 W. Batten Street

Lewes, DE 19958



**2021 APPLICATION**  
**SKYBOX**

Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

- Exclusive Birthday
- Saturday – Season (NO Passes - \$3000)
- Saturday – Season (WITH 6 Passes – \$5000)
- Friday – Season (NO Passes)
- Saturday – Season (WITH 10 Passes – \$7500)
- One Event – Date \_\_\_\_\_

*Is this a renewal from 2020?*  
YES NO

Preferences (if applicable):

Date(s): \_\_\_\_\_

Skybox #: \_\_\_\_\_

Catering/Beverage Preferences: \_\_\_\_\_

\_\_\_\_\_

**B27 Pro Entertainment OFFICE USE ONLY -**

**BOX #** \_\_\_\_\_

Total: \$ \_\_\_\_\_

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

Method of Payment:     Cash             Check # \_\_\_\_\_             CC authorized by: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B27 Rep.: \_\_\_\_\_

Initials: \_\_\_\_\_