



ST. LOUIS RAMS PSL TRANSFER FORM

OPEN TRANSFER PERIODS: FEBRUARY 1ST TO MAY 15TH
SEPTEMBER 1ST TO OCTOBER 31ST

Rams PSLs are fully transferable provided the account is in good standing. Transfers will only be processed during the periods above. **For one year (365 days) following the purchase of the PSL, the PSL holder cannot transfer the ownership of the PSL.** Transfers are subject to a transfer fee (detailed below). The Rams reserve the right to deny any transfer to any person, company or organization. **Please do not use this form for club seat transfers.**

PART I TO BE COMPLETED BY THE CURRENT PSL HOLDER

- If account is in a business name, authorization on company letterhead signed by an officer of the business must be included.

Seat Location(s) to be transferred: Section: _____ Row: _____ Seat(s): _____

Account Number: _____

Business Name (if applicable): _____

Name: _____

Address: _____

City, State, Zip: _____

Phone (Day): (_____) _____ (Evening): (_____) _____

Email Address: _____

Signature: _____ Date: _____

PART II TO BE COMPLETED BY THE NEW PSL HOLDER

New Account Number (to be assigned by the Rams): _____ or add to existing Account Number: _____

Business Name (if applicable): _____

Name: _____

Address: _____

City, State, Zip: _____

Phone (Day): (_____) _____ (Evening): (_____) _____

Email Address: _____

Signature: _____ Date: _____

- By signing this transfer form, the new PSL holder agrees to accept all terms and conditions of the Rams PSL Agreement.

PART III TRANSFER FEE

\$1000 PSL and up \$100.00 per transaction*

\$250 PSL & \$500 PSL \$25.00 per transaction*

* A completed transfer form is considered one transaction. The transfer fee is calculated by the number of transfer forms submitted, not the number of seats being transferred.

To make the \$25.00 or \$100.00 payment, please attach a check or complete the credit card information below (please make checks payable to the St. Louis Rams).

CC #: MC V AE D _____ Exp. Date: _____

Signature: _____ Print Name on Card: _____

Please return completed form and transfer fee to: St. Louis Rams Ticket Office - 901 North Broadway - St. Louis, MO 63101 - (314) 425-8830 FAX: (314) 342-5399

For ticket office use only: RCVD _____ CONTRACT _____ PSL _____ F _____ FEE _____ MEMO _____ NV _____