



For SA INK manager use only!

Do not write in this space!

Date Received: _____

SA INK Staff: _____

Group Name: _____

Group Acct #: _____

Date of Event: _____

SA INK TICKET SERVICE CONTRACT 2025-2026

SA INK Service Agreement Package

For use by SA Chartered Organizations

Hours of Operation (During Academic Schedule)

Monday – Friday 11:00am – 5:00pm

Closed Weekends and Holidays

Contact Information:

Manager: Julie Gha

E-mail: saink.manager@binghamtonsa.org

Office Phone: 607-777-4685

SA INK Ticket Policies and Procedures

General Information - SA Organizations that wish to print and sell tickets for their events must do so through SA Ink. After agreeing on tickets to be printed, groups may withdraw tickets from the SA Ink office to sell on their own (Consignment), or they may have SA Ink sell the tickets for them in the SA Ink office (Box Office Sales). Groups that sell under consignment may only withdraw up to \$500 worth of tickets (based on ticket price) at a time (up to \$1000 with approval from the SA VPF). **All proceeds from consignment sales must be returned to SA Ink**, which will deposit them into the relevant group's account.

Box Office Fees:

- | | |
|--|---|
| • SA Chartered Groups: | • Non-Affiliate Groups: |
| ▪ \$0.20 per ticket billed to the account | ▪ \$0.20 per ticket payable on receipt |

***A \$10 late fee per business day is charged for consignment tickets/proceeds not returned on time**

Order Placement Timeframe—All orders for ticket production must be received at least 10 business days prior to the date when tickets will go on sale.

Complimentary Tickets—Organizations must receive permission from the SA VPF in order to give away complimentary tickets. **Tickets may not be given away for free without permission, and there is a cap of 50 tickets.**

VPF Signature Approval*: _____

**Must be signed prior to contract submission to SA Ink.*

Tracking Sales—both SA Ink and the organization contracting with SA Ink are responsible for tracking sales

Ticket Access Rights—Up to three members of the organization may check out tickets, one of whom must be the President or Treasurer of the organization. Only designated members may exchange proceeds for additional tickets.

Ticket Pricing—Organizations may set multiple price points for tickets. The highest ticket valuation withdrawn shall be used to calculate ticket worth for consignment sales.

Penalties for Breach of Contract—Violation of the terms of this agreement, its policies, or any other SA Ink policies shall be subject to punishment, including but not limited to loss of the right to print and sell tickets, loss of the right to reserve spaces (as deemed fit by the SA EVP), and any other punishment the SA VPF deems fit under the FPP.

Attached Documents

- 1) **Service Agreement**
- 2) **Ticket Access and Information Form**
- 3) **Consignment Sale Agreement (for Ticket Sales within the SA Ink Office)**

Requests to print tickets shall be approved and overseen by the SA INK manager.

Any funds and/or extra tickets must be returned to SA INK by 5 pm the day after the event or the Monday following a weekend event.

Ticket Production/Sales Service Agreement

Before ticket production can commence, this agreement must be signed and completed.
The relevant event must be approved by the Student Association EVP on B-Engaged prior to completion.

_____ requests to use the services of SA INK in support of
(Organization Name)

_____ to be held on ____/____/____
(Event Title) (Event Date)

at _____ AM / PM at _____
(Event Time) (Event Location)

Organization Account Number: _____

This organization and its members agree to adhere to SA INK policies and procedures as described herein, and all accompanying documents, as follows:

1. Tickets will be sold starting ____/____/____ and ending ____/____/____.
2. The organization agrees to sell tickets only through SA INK unless given approval to do so by the SA VPF (please attach if relevant).
3. The organization understands that the sale of tickets outside the SA INK office without approval is a breach of this agreement and may result in all ticket sales for the event being terminated.
4. The organization understands that if any changes need to be made after this agreement has been submitted and/or ticket production/sales commenced, the organization will be charged for both the incorrect and corrected tickets.
5. The organization understands that SA INK reserves the right to spot check events and consignment ticket sales for compliance with this agreement.
6. The organization understands that it is responsible for any and all charges associated with this agreement.

On behalf of the above-stated organization, I agree to abide by the SA Ink Ticket Policies and Procedures, and all other terms and conditions set by this agreement, as well as affirm that all other individuals associated with the organization shall also abide by them. I authorize those indicated on the accompanying forms to conduct business with SA INK for this event on behalf of our organization.

Organization Treasurer or President:

(Print Name) _____/____/____
(Signature) (Date)

SA INK Manager:

(Print Name) _____/____/____
(Signature) (Date)

SA INK Clerk On Duty:

(Print Name) _____/____/____
(Signature) (Date)

SA INK Ticket Access and Information Form

Organization Name: _____ Organization Account Number _____

Only the designees listed below may check out tickets. One of the individuals must be the Organization President or Treasurer.

(Please Print)

Designee #1 (Primary Contact for this Event):

Name: _____

E-Mail Address: _____

Phone: _____

Designee #2

Name: _____

E-Mail Address: _____

Phone: _____

Designee #3

Name: _____

E-Mail Address: _____

Phone: _____

Date Tickets Go On Sale:

Below, please indicate the details of your event ticket sale requirements (Student pricing, non-student pricing, public pricing, graduate vs. undergraduate pricing, e-board/performer/group pricing, packages, members, non-members, etc).

Generic Pricing:

Type: _____ Price on ticket: _____ Number of Tickets to Be Printed: _____

Type: _____ Price on ticket: _____ Number of Tickets to Be Printed: _____

Type: Complimentary Number of Complimentary Tickets to Be Printed _____

Total number of tickets to be prepared for the event: _____

Special Ticket Pricing: (Indicate below any additional tickets needed, pricing, and the associated number of tickets to be printed. *Include special sales instructions as necessary.*)

SA Ink Manager Approval:

(Print Name)

(Signature)

____/____/____
(Date)

SA INK Consignment Agreement Form
(Only complete this page if selling tickets on consignment)

Terms of consignment agreement between SA INK and _____ (Group Name)

1. All tickets sold are neither exchangeable nor refundable through SA INK.
2. Only those students designated on the SA INK Ticket Access and Information Form may take tickets from the office for sale (BU ID is required).
3. Forms of Payment:
 - SA Organizations are automatically charged from their foundation accounts
 - Credit card numbers WILL NOT be accepted, and the organization will be charged accordingly.
 - Checks or Money Orders WILL NOT be accepted.
 - If the organization accepts any of these forms (mentioned above) as payment for a ticket, the group will be charged as if it were a sold ticket and is responsible for bringing forth the amount.
4. When depositing extra tickets or proceeds at the SA Ink office (Reconciliation)
 - Missing tickets are assumed to have been sold, and the organization will be charged accordingly.
5. Final Deposit at the SA Ink Office (Final Reconciliation):
 - ALL remaining tickets and money must return to SA INK by 5 pm within 24 hours following the last day of sales or the next business day following a weekend event.
 - There is a \$10 late fee charge per business day for consignment tickets not returned on time.
 - Organizations will be charged for all missing unsold tickets. SA INK will not proceed with the final reconciliation if the number of tickets sold does not agree with the money being returned.

I have read, understand, and agree to abide by these policies and procedures.

Event Primary Contact:

_____ Print Name	_____ Signature	_____ Date
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Event Designees:

_____ Print Name	_____ Signature	_____ Date
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_____ Print Name	_____ Signature	_____ Date
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SA Ink Manager Approval:

_____ Print Name	_____ Signature	_____ Date
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