



# LUXURY SEATING STATEMENT OF INTENT

I BELIEVE in the tradition and honor of the Fighting Illini football program, and I would like to be a part of the momentous changes underway to Illinois football's home, historic Memorial Stadium. Please find enclosed a refundable deposit\* indicating my dedication to the program and my interest in the new luxury seating opportunities available within the renovated Memorial Stadium.

<b>MEMORIAL STADIUM SUITES</b> (please circle preferred option)			
<b>Suite Location</b>	<i>price per year beginning in 2008*</i>		
	<i>lease term (years)</i>		
	<b>5</b>	<b>7</b>	<b>10</b>
Touchdown Suites – Outside the goal lines	\$ 49,000	\$ 47,500	\$ 45,500
All-American Suites – Goal lines to the 30-yard lines	\$ 54,000	\$ 52,500	\$ 50,500
Founders' Suites – Between the 30-yard lines			\$ 59,000

<b>77 CLUB SEATS</b> (please circle preferred option and indicate number of seats desired)			
<b>Seat Location</b>	<i>price per seat per year beginning in 2008*</i>		
	<i>lease term (years)</i>		
	<b>3</b>	<b>5</b>	<b>7</b>
Mid-Field (all seats between 30-yard lines)	\$ 3,900	\$ 3,600	\$ 3,300
<b>Number of 77 Club Seats Requested:</b>	_____	_____	_____

<b>COLONNADES CLUB SEATS</b> (please circle preferred option and indicate number of seats desired)			
<b>Seat Location</b>	<i>price per seat per year beginning in 2008*</i>		
	<i>lease term (years)</i>		
	<b>3</b>	<b>5</b>	<b>7</b>
Outside the 10-yard lines	\$ 1,750	\$ 1,650	\$ 1,575
10-yard lines to the 35-yard lines	\$ 2,250	\$ 2,150	\$ 2,000
Between the 35-yard lines	\$ 2,500	\$ 2,375	\$ 2,250
<b>Number of Colonnades Club Seats Requested:</b>	_____	_____	_____

\* Prices reflect annual commitments due each year by April 1. Prices will increase every commitment year by 2.5 percent to reflect the cost of inflation. Discounts for prepayment of entire contract term are available. No more than three parties may be included on each leasing contract. Founders' Suites available only on a ten-year lease.

† Any deposits paid will be counted toward the first year's contract commitment due on April 1, 2008. Deposit will be refunded should, due to inventory constraints, the customer's request not be fulfilled.

Note on Tax Incentives: Please see the sample gift calculations on page 10 of the enclosed brochure to learn about tax incentives for licensing luxury suites and club seats. Please be sure to consult a tax specialist for a personal evaluation of IRS regulations.

## THE MEMORIAL STADIUM CAMPAIGN Naming Opportunities & Philanthropic Gifts

I am interested in making a separate gift to sustain the Memorial Stadium Campaign. Please contact me with more information regarding gift and naming opportunities for this historic project.

Yes \_\_\_\_\_

No \_\_\_\_\_



**In submitting this Statement of Intent, I acknowledge my understanding of the following:**

- ◆ Final terms of any luxury seating opportunities will be contained in a separate licensing agreement, to be furnished at a later date, that will formalize the arrangements between the University of Illinois and the undersigned. Included in the licensing agreement will be specifics related to annual licensing fees, applicable charges, lease terms, rules and conditions of use, and other pertinent matters.
- ◆ Indication of interest in any luxury seating does not guarantee that such seating will be available, and the invitation to return this form does not constitute an agreement that such a request will be met.
- ◆ Prompt return of this letter maximizes the chance that luxury seating will be available, as remaining luxury seating is available on a first-come, first-served basis.

## DEPOSIT SCHEDULE

The deposit amounts listed below are per seat/suite. For example, the deposit required to request four outdoor club seats is \$250 per seat x 4 seats, or \$1,000. Checks should be made payable to the University of Illinois:

- Memorial Stadium Suites: \$10,000
- 77 Club Seats: \$500
- Colonnades Club Seats: \$250

According to this deposit schedule, I have included a deposit in the amount of \$\_\_\_\_\_ for the luxury seating preferences indicated in the tables on the opposite page.

Name (printed): \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone Number: (\_\_\_\_)\_\_\_\_\_ Preferred E-Mail: \_\_\_\_\_

Alt. Phone Number: (\_\_\_\_)\_\_\_\_\_ I am paying by:  
 Check payable to the University of Illinois  
 MasterCard  Visa

\_\_\_\_\_  
Credit Card Number Exp. Date

I, the undersigned, have read and agree to the conditions and terms contained within this letter of intent.

\_\_\_\_\_  
Signature Date

Please return Letter of Intent & Luxury Deposit to:

Warren Hood, Associate Director of Athletics  
Bielfeldt Athletics Administration Building  
1700 South Fourth Street  
Champaign, IL 61820