

Send completed form to:

PSL Transfer  
LP FIELD  
1 Titans Way  
Nashville, TN 37213

Ticket Office: [615] 565-4200  
Ticket Fax: [615] 565-4212



# PSL TRANSFER FORM

*Make sure you have:*

1) Copies of both parties drivers licenses

2) \$100 Transfer fee  
*Cash, Cashier's Check or Money Order only*

I hereby release the Tennessee Titans from any further obligations or liability with regard to the subject PSL/Club Seat(s) and waive any and all rights to the privileges which accompany the ownership of said seat(s).

The undersigned TRANSFEREE hereby:

- accepts all of the rights and privileges granted by the subject PSL/Club Seat(s).
- assumes all obligations connected therewith, including the obligation to purchase season tickets each year for the subject seat(s) and for the term remaining on the transferor's license agreement (if Club seats).
- agrees to abide by all rules and regulations applicable to the subject PSL/Club Seat(s) including, but not limited to, the contract.

THIS AGREEMENT CONSISTS OF THE TERMS AND CONDITIONS ON THIS PAGE AND THE ADDITIONAL TERMS AND CONDITIONS CONTAINED IN YOUR PSL/CLUB SEAT CONTRACT WHICH ARE INCORPORATED BY REFERENCE AS A PART OF THIS AGREEMENT. To simplify the completion and execution of this agreement, all variables in the agreement including the execution section, appear on this page.

- **PSL(s) in the name of a company must have a letter from an officer of the company on company letterhead to be transferred.**
- **Parking can only be transferred with club seats. Parking is limited to 1 pass for up to four seats owned**
- **PSL(s) cannot be transferred more than one time within a single transfer period.**
- Transfers involving a divorce must be accompanied by a divorce decree.

## Seat(s) to be transferred to the Transferee

Section \_\_\_\_\_ Row \_\_\_\_\_ Seats \_\_\_\_\_ thru \_\_\_\_\_

Parking (if applicable): # of passes \_\_\_\_\_ Lot # \_\_\_\_\_

### CURRENT OWNER INFORMATION (TRANSFEROR)

### NEW OWNER INFORMATION (TRANSFEREE)

**Account Number** \_\_\_\_\_

**New Account Number** \_\_\_\_\_  
*(Office use only)*

ACCOUNT  
NAME \_\_\_\_\_  
CONTACT NAME  
(IF COMPANY ACCOUNT) \_\_\_\_\_

ACCOUNT  
NAME \_\_\_\_\_  
CONTACT NAME  
(IF COMPANY ACCOUNT) \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHONES (O) \_\_\_\_\_  
(H) \_\_\_\_\_

PHONES (O) \_\_\_\_\_  
(H) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

*Transferor hereby certifies the information set forth herein is correct.*

*Transferee hereby certifies the information set forth herein is correct.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

Please choose one of the following in reference to any credits after season tickets are paid in full:

- No credit                                       Retain any credit to current account  
 Transfer to new owner                       Refund

*(Please note that refunds take 6 to 8 weeks.)*

