

MCHS Band/Guard Student Trip Payment Form

Student Name: _____

Graduation Year/Instrument: _____

Parent's Name: _____

Parent's Contact Information: Best phone number for parents to be reached &

Parent's e-mail address: _____

PAYMENT AMOUNT ENCLOSED: _____

PLEASE MAKE CHECKS PAYABLE TO: MCHS BAND BOOSTERS

PLEASE FILL OUT A STUDENT BAND ACCOUNT DISBURSEMENT FORM IF FUNDS FROM YOUR STUDENTS BAND ACCOUNT ARE TO BE USED FOR TRIP PAYMENT.

PLEASE PLACE ALL TRIP PAYMENTS IN THE BLACK BOX IN THE BAND ROOM.

TRIP PAYMENT SCHEDULE:

FIRST NON-REFUNDABLE PAYMENT of \$50.00 DUE BY: 8/28/2009

SUBSEQUENT PAYMENT DUE DATES:

SEPTEMBER 25, 2009 AMOUNT DUE: \$200.00

OCTOBER 23, 2009 AMOUNT DUE: \$200.00

NOVEMBER 20, 2009 AMOUNT DUE: \$200.00

DECEMBER 18, 2009 AMOUNT DUE: \$200.00

JANUARY 22, 2010 REMAINING BALANCE DUE: \$328.00

QUESTIONS SHOULD BE DIRECTED TO: SUE KRATZ: (815) 521-1186,

sekratz@sbcglobal.net or KIM GORDON (815) 258-7723,

simplelife4me70@comcast.net