



**JULY 13 – 18, 2020**

TEEN'S NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_ GENDER: M F SHIRT SIZE: S M L XL XXL

TEEN'S CELL PHONE: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

PARENT'S PHONE: \_\_\_\_\_

PARENT'S EMAIL: \_\_\_\_\_

TO BE COMPLETED ONLY BY AUTHORIZED PARISH ADMINISTRATOR					
Amount Paid:	\$ _____	Balance:	\$ _____	Receipt #:	_____
_____ Cash	_____ Check	Check # _____	_____ CC	CC Type & #:	_____
2 <sup>nd</sup> Payment:	\$ _____	New Balance:	\$ _____	Receipt #:	_____
_____ Cash	_____ Check	Check #: _____	_____ CC	CC Type & #:	_____
Final Payment:	\$ _____	New Balance:	\$ _____	Receipt #:	_____
_____ Cash	_____ Check	Check # _____	_____ CC	CC Type & #:	_____
Posting Dates:	_____	_____	_____	ADMIN Initials:	_____

**Tear and Keep Bottom Half**

**TOTAL COST: \$600**

**PAYMENT PLAN**

**October 30, 2019 - \$100 DEPOSIT DUE (NON-REFUNDABLE)**

**January 14, 2020 - \$200 PAYMENT DUE (NON-REFUNDABLE)**

**April 1, 2020 - \$300 or REMAINING BALANCE DUE (NON-REFUNDABLE)**