

Martin Warrior Band – “CHICAGO, FULL BLOWN” 2009-10 Spring Trip Agreement

(PLEASE RETURN SIGNED COPY TO MR. HART @ THE MARTIN WARRIOR BAND HALL)

Payment Schedule

| | | |
|-------------------------|------------------|-----------------|
| Non-refundable deposit | October 13, 2009 | \$150.00 |
| 2 nd Payment | November 5, 2009 | \$210.00 |
| 3 rd Payment | December 3, 2009 | \$210.00 |
| 4 th Payment | January 7, 2010 | \$210.00 |
| Final Payment | February 4, 2010 | \$200.00 |
| | TOTAL | \$980.00 |

You may combine payments if you wish. Please note that all payments are due **NO LATER** than the listed date. We must make payments to the travel agency within days of a payment due date. Please plan accordingly.

Parent and Student signatures on this contract and the \$150.00 non-refundable deposit commit the “named student” to participation in the 2010 Spring Trip to Chicago, Illinois. The trip cost is \$980.00 which includes air and ground travel, entrance to all shows, concerts, activities, museums, etc., and an average of two meals per day. Each student is financially responsible for the remaining meals, personal expenses (including airline luggage charges) and souvenirs. I understand the importance of adhering to the payment schedule and agree to make payments as they are due, in order to hold the reservation. If a payment is late, the reservation could be subject to forfeiture.

I have read and understand the Martin Warrior Band Spring Trip Agreement and agree to accept responsibility for following the stated policies. I also realize that students must be “academically eligible” according to the UIL Calendar (must pass 4th Six Weeks) in order to travel and participate with the Martin Warrior Band. I further realize that my payments are non-refundable if I am unable to maintain eligibility. I understand that failure to follow directions from the band directors could result in disciplinary action, leading to a return flight home at the family’s personal expense. I accept my responsibility to cooperate and represent the Martin Warrior Band with integrity at all times.

(Student Name – PRINTED)

(Parent Name – PRINTED)

(Student Signature)

(Parent Signature)

PARENTS!!! If you are interested in being a chaperone for the 2010 Chicago Spring Trip, please complete the following section. If you are not interested, leave this section blank. (Chaperone Trip cost is the same as the Student Trip cost.)

Interested Chaperone: _____ Phone Number: _____

Email Address: _____

Interested Chaperone: _____ Phone Number: _____

Email Address: _____