Canyon High School Band Trip March 17 – 22, 2015 Orlando, Florida

Student / Parent Interest Form

Student Name: _____ Grade Level (2014 – 2015): _____

Instrument: _____

Parent(s) Name:_____

E-Mail:

Phone #: ______

Estimated Payment Schedule (Subject to Change):

- \$900 per student participant
 - Monday, May 5th: \$150
 - Monday, June 2nd: \$150
 - Monday, Sept 8th: \$150
 - Monday, Oct. 6th: \$150
 - Monday, Nov. 3rd: \$150
 - Monday, Jan. 5th:Final Balance (Est. \$150)

• \$450 per parent chaperone

- Chaperone payment dates are the same as above at ½ rate.
- Maximum of 16 chaperones at this rate. Based on student seniority.
- Other interested parents may attend the trip at the student participant rate.

_____YES! I am interested in my student attending the CHS Band Trip for 2015.

_____YES! I am also interested in traveling as a chaperone for the band trip

• If yes, how many of this student's parent(s) would like to chaperone?

NOTE: Final trip reservation contracts will be sent out electronically to the e-mail address listed above in approximately (2) weeks.

Parent Signature: Dat	e:
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