

Please complete and attach this form to payments you submit for ASP trip fees.*

Date: _____

The attached payment is for:

The ASP trip deposit of \$50 each for the following participant(s) *:

The unpaid balance of the fees for the ASP trip in the amounts indicated for the following participant(s) *:

Amount	For participant(s)
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

When submitting your first payment for the ASP trip, please sign below if you are a parent or guardian of an ASP youth participant who either:

- a. is in high school during school year 2020-2021 or
- b. will be 17 years or younger at the time of the ASP trip.

I approve my youth's participation in the ASP trip.

Signature of parent/guardian: _____

* Notes about ASP trip fees:

- 1. Total fee cost for the ASP trip is \$400.00 for each participant.
- 2. If you would like financial help with the cost of the trip, please contact the ASP trip leadership.
- 3. Make payment checks payable to "Good Samaritan ASP". Attach your payment to this completed form and send these to the Good Samaritan church office.
- 4. Trip fees are refundable if you are replaced on the trip roster by someone on the waiting list or in the event that the entire trip is cancelled.