

PAYMENT # 1 – Due 11/20/2023

REAGAN/Washington, DC

1st Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

2nd Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

3rd Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

4th Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

Are you paying by credit card or check? If credit card, please fill out all credit card info. **If check, please enclose one check *for combined amount for this installment* for all travelers listed here.**

Credit Card Information: Name on the Card _____

Credit Card Billing Address: _____

Credit Card #: _____ Exp: _____ Security Code: _____

Card Holder's Signature: _____

Card Holder's Email address: _____ (to receive receipt)

Today's Date: _____

Your signature authorizes credit card payment for this installment for all travelers listed here.

Email completed form to: gray@blacktietransportation.net or

Write check payable to **Academic Field Trips and Tours** and mail check and this completed form to: Academic Field Trips and Tours, 3050 Ridgewood Rd., Winston-Salem, NC 27107

PAYMENT # 2 – Due 1/20/2024

REAGAN/Washington, DC

1st Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

2nd Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

3rd Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

4th Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

Are you paying by credit card or check? If credit card, please fill out all credit card info. **If check, please enclose one check *for combined amount for this installment* for all travelers listed here.**

Credit Card Information: Name on the Card _____

Credit Card Billing Address: _____

Credit Card #: _____ Exp: _____ Security Code: _____

Card Holder's Signature: _____

Card Holder's Email address: _____ (for receipt)

Today's Date: _____

Your signature authorizes credit card payment for this installment for all travelers listed on this form.

Email completed form to: gray@blacktietransportation.net or

Write check payable to **Academic Field Trips and Tours** and mail check with
this completed form to: Academic Field Trips and Tours, 3050 Ridgewood Rd.,
Winston-Salem, NC 27107

PAYMENT # 3 – Due 3/20/2024

REAGAN/Washington, DC

1st Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

2nd Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

3rd Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

4th Traveler's Name: _____

- Traveler's Room Type: Quad / Triple/ Double / Single (circle one)
- Traveler's status: Student/ Adult Chaperone/ Adult Non-Chaperone/ Child-Sibling (circle one)
- Payment Amount for this traveler: (refer to table) _____

Are you paying by credit card or check? If credit card, please fill out all credit card info. **If check, please enclose one check *for combined amount* for this installment for all travelers listed here.**

Credit Card Information: Name on the Card _____

Credit Card Billing Address: _____

Credit Card #: _____ Exp: _____ Security Code: _____

Card Holder's Signature: _____

Card Holder's Email address: _____ (for receipt)

Today's Date: _____

Your signature authorizes credit card payment for this installment for all travelers listed on this form.

Email completed form to: gray@blacktietransportation.net or
Write check payable to **Academic Field Trips and Tours** and mail check with
this completed form to: Academic Field Trips and Tours, 3050 Ridgewood Rd.,
Winston-Salem, NC 27107