Martial Art Leadership Camp 2010 at Baker Demonstration School

PAYMENT INFORMATION

Camper Fees (from Summary)

Camper 1 Name: _____ $_____
Last First

Camper 2 Name: _____ $_____
Last First

Camper 3 Name: _____ $_____
Last First

Camper 4 Name: _____ $_____
Last First

Total Fees for all Campers (Camp and Extended Care) $_____

Less:
$500 deposit X ____ # of campers ($_____)
(*Per camper*, *due with registration*)

Less:
$75 Early Bird Discount X ____ # of campers ($_____)
(*Per camper*, *if registered by March 1, 2010*)

Balance Due $_____

Payment Method:

☐ **Cash** ☐ **Check** (*payable to Baker Demonstration School)*

☐ **VISA** ☐ **MasterCard** ☐ **American Express**

Account number

Expiration date 3 or 4 digit security code on back of card

Name of Cardholder as Shown on Card (please print)

Billing Address of Credit Card

City State Zip

Cardholder Signature

Credit Card Auto Pay: Your account will be charged automatically on 4/15/2010 and 5/15/2010

Please return your completed registration and payment forms, along with the deposit, to the following address:

By fax: 847-425-5801: attention Summer Registration (credit card only)

By mail: Baker Demonstration School
Martial Art Leadership Camp
201 Sheridan Rd.
Wilmette, IL 60091