

Cancellation

CANCELLATION FORM

(Do not return this form unless you are canceling your reservation.)

UPPER ST. CLAIR SPRING MUSIC TRIP
ORLANDO, FLORIDA
APRIL 8- APRIL 12, 2010

**Until this form is signed and submitted,
you are financially responsible for the cost of the trip
according to the rules listed below.**

The cancellation policy for the Music Department trip is as follows:

1. Only cancellations submitted in writing will be accepted. This form must be signed by the parent/guardian and mailed to the trip chairperson (address at bottom of form). The chairperson will date the form upon receipt and the cancellation will be effective and penalties determined on that date.
2. The deposit and late fees are non-refundable.
3. A **\$200.00 cancellation fee will be charged** if a student's cancellation form is received between February 1 and March 7, 2010 in addition to the original \$100.00 trip deposit.
4. If the student decides on or after March 8, 2010 that he/she will not participate in the trip, he/she and his/her parents/guardians will be responsible for paying the **TOTAL AMOUNT** of the trip cost.

I am the parent or legal guardian of _____ . My son/daughter will be unable to participate in the Music Department Spring Trip on April 8 – April 12, 2010. Please withdraw him/her from the trip.

Student's Name (Print)

Parent's/Guardian's Signature

Date

Parent's/Guardian's Name (PRINT)

Return completed form to: Jim Gilson, 1327 Moon Ridge Drive, Upper St. Clair, PA 15241.

If you have any questions, please call Jim Gilson (412-915-2616), Sandy Thompson (412-851-1452) or Dale Boyer (412-831-8367).

Trip Chairperson only:

Received by:

Date: