

Pearl Harbor Memorial Parade- Hawaii Registration Form

Name: _____ School: _____

Phone Number: _____ E-mail: _____

Please indicate which pricing package you (**ALL STAR TEAM MEMBER**) have chosen by placing a check mark in one of the boxes below:

Package + Airfare		Package Only	
Quad Rate:	<input type="checkbox"/> \$2,740 (4 Nights) <input type="checkbox"/> \$2,840 (5 Nights)	<input type="checkbox"/> \$1,725 (4 Nights) <input type="checkbox"/> \$1,825 (5 Nights)	
Triple Rate:	<input type="checkbox"/> \$2,870 (4 Nights) <input type="checkbox"/> \$3,010 (5 Nights)	<input type="checkbox"/> \$1,855 (4 Nights) <input type="checkbox"/> \$1,995 (5 Nights)	
Double Rate:	<input type="checkbox"/> \$3,145 (4 Nights) <input type="checkbox"/> \$3,350 (5 Nights)	<input type="checkbox"/> \$2,130 (4 Nights) <input type="checkbox"/> \$2,335 (5 Nights)	
Single Rate:	<input type="checkbox"/> \$3,965 (4 Nights) <input type="checkbox"/> \$4,375 (5 Nights)	<input type="checkbox"/> \$2,950 (4 Nights) <input type="checkbox"/> \$3,360 (5 Nights)	

Do you plan to room with anyone?

Yes – Please list your name and the names of those you plan to room with:

1) _____ 2) _____

3) _____ 4) _____

Will any of your family members be purchasing a package to attend the trip with you?

No

Yes – Please list your family members' names and indicate their pricing package below.

1) _____ 2) _____

3) _____ 4) _____

Package + Airfare		Package Only	
Quad Rate:	<input type="checkbox"/> \$2,640 (4 Nights) <input type="checkbox"/> \$2,740 (5 Nights)	<input type="checkbox"/> \$1,625 (4 Nights) <input type="checkbox"/> \$1,725 (5 Nights)	
Triple Rate:	<input type="checkbox"/> \$2,770 (4 Nights) <input type="checkbox"/> \$2,910 (5 Nights)	<input type="checkbox"/> \$1,755 (4 Nights) <input type="checkbox"/> \$1,895 (5 Nights)	
Double Rate:	<input type="checkbox"/> \$3,045 (4 Nights) <input type="checkbox"/> \$3,250 (5 Nights)	<input type="checkbox"/> \$2,030 (4 Nights) <input type="checkbox"/> \$2,235 (5 Nights)	
Single Rate:	<input type="checkbox"/> \$3,865 (4 Nights) <input type="checkbox"/> \$4,275 (5 Nights)	<input type="checkbox"/> \$2,850 (4 Nights) <input type="checkbox"/> \$3,260 (5 Nights)	

Payment #1 – Deposit: DUE FRIDAY, AUGUST 14TH

\$1,000 Deposit for **All Star**

All Star Deposit = \$1,000

\$1,000 Deposit for each **Family/Non-performers**

\$1,000 X # of non-performers = \$ _____

Total Amount enclosed = \$ _____

Payment Method

CASH
 CHECK
 CREDIT CARD (No AMEX)
 MONEY ORDER

***PLEASE NOTE:** Payment #1 must be submitted with this registration form. Payment #2 (\$750 for packages without airfare and \$1,500 for packages with airfare) is due 9/21/15. Payment #3 is due 11/2/15 and will be the remainder of the balance. If you would like to authorize automatic payment on your credit card for Payments #2 and #3 please check the box.

Authorization for payment by credit card on Monday, 9/21/2013 and 11/02/2015.

Credit Card # _____ Expiration Date: ____/____ 3-Digit Code _____

Name of Card Holder: _____ Billing Address: _____



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