



# UPA Disney Tour

## Deposit Slip Payment #1- Anytime

School/Studio/Gym Name: \_\_\_\_\_ (circle) Dance Cheer Both  
 Group Contact Name: \_\_\_\_\_ (circle) Dir/Tchr Coach Other:  
 Email: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_ Day Phone: ( ) \_\_\_\_\_  
 Address: \_\_\_\_\_ Eve Phone: ( ) \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**ARRIVAL DAY:** Sat Sun Mon Tue  
 Actual DATE: \_\_\_\_\_

**DEPARTURE DAY:** Sat Sun Mon Tue  
 Actual DATE: \_\_\_\_\_

### DEPOSIT DUE

Total Guest = \_\_\_\_\_ X \$100 non-refundable deposit = Amount Due \$ \_\_\_\_\_

### Estimated ROOM Block:

# QUAD rooms (4 per room) = \_\_\_\_\_ # TRIPLE rooms (3 per room) = \_\_\_\_\_  
 # DOUBLE rooms (2 per room) = \_\_\_\_\_ # SINGLE rooms (1 per room) = \_\_\_\_\_  
 # COMMUTER packages (no rooms) = \_\_\_\_\_

### PAYMENT INFORMATION

\_\_\_\_ Amount \$ \_\_\_\_\_  
 \_\_\_\_ Check Enclosed # \_\_\_\_\_  
 \_\_\_\_ Charge my (circle) VISA MASTERCARD AM EXPRESS DISCOVER  
 (3.5% service charge added)  
 Name on Card: \_\_\_\_\_  
 Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Expiration Date: \_\_\_\_ / \_\_\_\_ VIN # \_\_\_\_\_ (3 digits on back of card)  
 Billing Address: House #: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**Mail To: UPA Disney Tour 11101 Zealand Ave N, Champlin, MN 55316**