



# UPA Disney Tour

## Payment #3- due September 15th

School/Studio/Gym Name: \_\_\_\_\_

Group Contact Name: \_\_\_\_\_ Day Phone: (    ) \_\_\_\_\_

Refer to the most current statement for account balance. TOTAL remaining balance is due at this time.

<http://www.upainc.net/site/disney/disney.htm>

### SEPTEMBER 15<sup>th</sup> - FINAL PAYMENT DUE

*Name change fees, extra room nights, and late fees due with final payment. A **\$25 per person late fee** will be applied to the balance if it is not paid in full by September 15<sup>th</sup>. Account will be cancelled with no fees refunded if balance is not paid in full by October 1<sup>st</sup>.*

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### 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**