

Creative Space Hawaii Payment Form

Camper Name _____
Parent Name _____
Session Dates: August 5th-August 17th, 2012

For Office Use only
CCard _____ Check _____
Date Rec'vd _____
Input _____
Processed _____ Mailed _____
Balance Due (Amt/Date) _____

Discounts:

EARLY BIRD SPECIAL: 300\$ off for payments made in full by March 31st, 2012

SIBLINGS: Save \$150 on siblings (not off the first family member registered)

Tuition	_____ <u>3195</u>
Applicable Discount(s)	_____
Spending Money (\$100 max)	_____
Baggage Fee (Bags NOT to exceed 50 lbs)	_____ <u>100</u>
Total	_____
Less Deposit (\$500 per child)	_____
Balance Due	_____

Payment Options

Total Payment now

Deposit now (\$500 per child) and remaining balance on 5/31/12 when full payment is due.

Payment Type

_____ Check. Please make checks out to Creative Space.

_____ Credit Card. I authorize Creative Space to charge my credit card for the amounts listed above:

Credit Card # _____ (Visa or MasterCard only)

Exp. _____ Billing Zip Code _____

Name on Card _____

Signature _____

Please submit along with Registration form to:

Creative Space
11916 W. Pico Blvd.
Los Angeles, CA 90064
www.creativespaceusa.com
email: creativespaceusa@gmail.com
Ph (310) 231-7600, Fax (310) 231-7602