



**COD Symphonic Band  
New York City Performance at Carnegie Hall  
March 28 - April 2, 2019**

**Traveler Information**

First & Last Name: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_

**Please Initial on Each Line**

\_\_\_\_\_ I understand that to participate, all payments are due in full to the Bursar's Office by December 1, 2018.

\_\_\_\_\_ I understand that should I cancel my commitment to participate, refunds are available until October 1, 2018 through accounts payable.

\_\_\_\_\_ I understand that if I cancel my commitment to participate after October 1, 2018 \$800.00 will be non-refundable.

\_\_\_\_\_ I understand that after December 1, 2018 all money paid to the Bursar's Office is non-refundable.

**Choose appropriate option(s) below**

<b>PERFORMER OPTIONS</b>		<b>NON-PERFORMER OPTIONS</b>	
Includes hotel accomodation, travel arrangements, festival fees.		Includes hotel accommodation and travel arrangements.	
*Community Members add \$500.00 to the total rates below			
_____ Single Occupancy	\$ 1,700.00	_____ Double Occupancy	\$ 1,210.00
_____ Double Occupancy	\$ 1,200.00	_____ Triple Occupancy	\$ 1,020.00
_____ Triple Occupancy	\$ 950.00		
_____ *Community Member	\$ 500.00		

<b>Department Use Only</b>		<b>Bursar Use Only</b>	
Total Invoice Amount: _____		Invoice #: _____	
Initials: _____ Date: _____		Initials: _____ Date: _____	