



## OLA Summer Mission Trip Registration

We are thrilled that your teen will be joining us on our Mission Trip this summer! As we discussed in the informational meeting, we will be fundraising a large portion of the total cost for the trip. However, in order to ensure we pay all fees on time we ask that all families regularly make payments.

CHILD'S NAME \_\_\_\_\_  
FIRST MIDDLE LAST

CHILD'S E-MAIL ADDRESS \_\_\_\_\_

CHILD'S PHONE NUMBER \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_  
FIRST MIDDLE LAST

PARENT'S E-MAIL ADDRESS \_\_\_\_\_

PARENT'S PHONE NUMBER \_\_\_\_\_

MY CHILD WILL BE GOING ON THE (circle one)

JUST5DAYS MIDDLE SCHOOL TRIP OR YOUNG NEIGHBORS IN ACTION TRIP

Since I am unable to pay the full mission cost of \$220 for J5D or \$250 for YNIA at this time, I would like to request the following schedule of payments. I will pay:

**By the end of** \_\_\_\_\_ **the amount of** \_\_\_\_\_

March \_\_\_\_\_

April \_\_\_\_\_

May \_\_\_\_\_

June \_\_\_\_\_

**For a total of** \_\_\_\_\_

I agree to pay my balance in full according to the schedule I've created above. I understand that by signing below my family is responsible for the entire \$220/\$250 Individual contribution and \$220/\$250 Family & Friends Shareholder contribution. I also understand that all payments are non-refundable and that if I do not cancel before the dates given I will still pay the remaining balance due.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_