

Austintown Band Parents Club, Inc. Trip Payment Coupon #2

Payment Date: October 6, 2017

Payment Amount: \$85

Student Name: _____ Grade 2017-2018: _____

Payment Method:

Check # _____ Withdraw from my Student Account _____ Verified Incentive Points _____

Please make checks payable to: **Austintown Band Parents Club, Inc.** (please include "trip payment" & student name on memo line)

Send payments to: Austintown Band Parents Club, Inc.

Post Office Box 4460

Austintown, Ohio 44515

Austintown Band Parents Club, Inc. Trip Payment Coupon #3

Payment Date: November 3, 2017

Payment Amount: \$85

Student Name: _____ Grade 2017-2018: _____

Payment Method:

Check # _____ Withdraw from my Student Account _____ Verified Incentive Points _____

Please make checks payable to: **Austintown Band Parents Club, Inc.** (please include "trip payment" & student name on memo line)

Send payments to: Austintown Band Parents Club, Inc.

Post Office Box 4460

Austintown, Ohio 44515

Austintown Band Parents Club, Inc. Trip Payment Coupon #4

Payment Date: December 1, 2017

Payment Amount: \$85

Student Name: _____ Grade 2017-2018: _____

Payment Method:

Check # _____ Withdraw from my Student Account _____ Verified Incentive Points _____

Please make checks payable to: **Austintown Band Parents Club, Inc.** (please include "trip payment" & student name on memo line)

Send payments to: Austintown Band Parents Club, Inc.

Post Office Box 4460

Austintown, Ohio 44515

Austintown Band Parents Club, Inc. Trip Payment Coupon #5

Payment Date: January 12, 2018

Payment Amount: \$85

Student Name: _____ Grade 2017-2018: _____

Payment Method:

Check # _____ Withdraw from my Student Account _____ Verified Incentive Points _____

Please make checks payable to: **Austintown Band Parents Club, Inc.** (please include "trip payment" & student name on memo line)

Send payments to: Austintown Band Parents Club, Inc.

Post Office Box 4460

Austintown, Ohio 44515

Austintown Band Parents Club, Inc. Trip FINAL Payment Coupon

Payment Date: February 9, 2017

Payment Amount: estimated at \$135

Student Name: _____ Grade 2017-2018: _____

Payment Method:

Check # _____ Withdraw from my Student Account _____ Verified Incentive Points _____

Please make checks payable to: **Austintown Band Parents Club, Inc.** (please include "trip payment" & student name on memo line)

Send payments to: Austintown Band Parents Club, Inc.

Post Office Box 4460

Austintown, Ohio 44515