

OFFICE OF SOPHOMORE INITIATIVES

ROAD TRIP BILLING FORM

Student name: _____

Student ID: _____

Road Trip date: January 13-15, 2012

Location: Willow Valley Resort & Conference Center
Lancaster, PA

Please read the following billing information carefully and sign your name at the bottom of the form. Your signature indicates that you have read, understand and agree to the billing statement.

As mentioned in the RoadTrip invitation, the cost of RoadTrip per student is over \$400.00 which is subsidized by the Loyola. Given that RoadTrip takes place in at a resort, all rooms and meals are paid for in advance. Therefore, the number of participants must be confirmed by November 30, 2011. Students who cancel their RoadTrip registration after November 30, 2011 will lose their \$75.00 deposit and their Loyola student account will be billed \$400.00 to cover the cost of the RoadTrip.

I, _____ agree after registering for RoadTrip if I do not attend my student account will be charged \$ 400.00:

Student signature: _____

Date: _____

Received by Sophomore Initiatives: _____

Date: _____

**Please return completed form to
Office of Sophomore Initiatives located in Seton Court 4508A
Phone 410-617-5696**