



WASHINGTON STATE YOUTH & GOVERNMENT

CONA DELEGATION PAYMENT FORM

STUDENT NAME _____

PARENT NAME _____

HOME PHONE _____

PARENT EMAIL _____

STUDENT EMAIL _____

___ Payment One (due Jan. 28) X \$200

___ Payment Two (due March 10) X \$400

___ Payment Three (due April 9) X \$350

___ Payment Four (due May 3) X \$400

TOTAL ENCLOSED \$ _____

Enclosed is a (please circle one): Check / Purchase Order / Credit Card / JV

Please charge \$ _____ to my Visa or MasterCard (please circle one)

Card # _____

Exp Date _____ Security Code _____ (on back of card)

Name on Card _____

Address _____ City _____ State _____ ZIP _____

Signature _____ Date _____

Please make your check or purchase order payable to YMCA Youth & Government and mail to:

YMCA Youth & Government
PO Box 193, Olympia, WA 98507
360.357.3475 (p) 360.753.4615 (f)
sclinton@seattleyymca.org
www.youthandgovernment.org