To register, please return this form with your nonrefundable, nontransferable deposit.

The Pittsburgh Project 2801 North Charles Street, Pittsburgh, PA 15214 phone: 412-321-1678 x526 fax: 412-321-3813; email: <a href="mailto:lpfeiffer@pittsburghproject.org">lpfeiffer@pittsburghproject.org</a>
Attn: Lauren Pfeiffer



## The Pittsburgh Project Service Camp Group Contract 2017-2018

Contac	t Person:					_
Trip Le	eader Attending (if dif	ferent):				_
	n/Organization:					
Mailing Address:						
City, St	ate, ZIP:					
Daytin	ne Telephone:					
Email:						
	ould you like us to ser ould you like us to ser					USPS
	Choose Your Session. Write the Dates Here:20			What Type of Session is it? <i>Circle One:</i> Summer Weekend Custom One Day		
	Number of Adults (21+) (at least 1 per 5)	Number of Young People	Total Number of Participants	Deposit Per Person for Your Chosen Session	Total Deposit (Enclosed)*	
	+	= *	=			
	*Payment may	be made by check	to "The Pittsburgh	n Project" or MC/Vi	sa via phone.	
		A NOTE ABOUT	Γ FINANCIAL RES D AND SIGN IN AC	PONSIBILITY	·	
droppe unders but I w COMM	ning this contract, I uned at any time are forfestand that before the Firill not be responsible ITMENT DAY for my toarticipants I bring to	eited; they may no INANCIAL COMMI for the remaining rip, I am responsib	t be transferred to TMENT DAY for r tuition for the dro ble for the full tuit	o the remaining bal- ny trip, if I drop spo opped spots. After tl	ance due. I also ots I will lose my he FINANCIAL	deposit,
Signati	ure of Contact Person			Date		
Signati	ure of Staff at The Pitts	sburgh Project		Date		