

DETERMINING YOUR PROGRAM COST:

Please refer to the "ATI PROGRAM UPDATE #1: DISCOUNTS, COSTS & OTHER DETAILS" document to help you complete the "ATI APPLICATION FORM."

PROGRAM #1:

PROGRAM COST: _____ . _____ The full cost which appears in the PROGRAM INFORMATION SHEET.

PLUS: Any additional charges such as SINGLE SUPPLEMENT COST- if available, etc.

+ _____ . _____ _____ Please describe

+ _____ . _____ _____ Please describe

MINUS: Any discounts such as for repeat travel as an "ATI TRAVEL VETERAN," ATI PROMOTIONAL DISCOUNTS, "OVERLAP DISCOUNT" for overlapping consecutive trips, etc.

- _____ . _____ _____ Please describe

- _____ . _____ _____ Please describe

- _____ . _____ _____ Please describe

YOUR TOTAL ATI PROGRAM #1 COST:

= _____ . _____ The total cost which you are paying for your ATI PROGRAM after additional charges, discounts, etc.

PROGRAM #2:

PROGRAM COST: _____ . _____ The full cost which appears in the PROGRAM INFORMATION SHEET.

PLUS: Any additional charges such as SINGLE SUPPLEMENT COST- if available, etc.

+ _____ . _____ _____ Please describe

+ _____ . _____ _____ Please describe

MINUS: Any discounts such as for repeat travel as an "ATI TRAVEL VETERAN," ATI PROMOTIONAL DISCOUNTS, "OVERLAP DISCOUNT" for overlapping consecutive trips, etc.

- _____ . _____ _____ Please describe

- _____ . _____ _____ Please describe

- _____ . _____ _____ Please describe

YOUR TOTAL ATI PROGRAM #2 COST:

= _____ . _____ The total cost which you are paying for your ATI PROGRAM after additional charges, discounts, etc.

PROGRAM #3:

PROGRAM COST: _____ . _____ The full cost which appears in the PROGRAM INFORMATION SHEET.

PLUS: Any additional charges such as SINGLE SUPPLEMENT COST- if available, etc.

+ _____ . _____ _____ Please describe

+ _____ . _____ _____ Please describe

MINUS: Any discounts such as for repeat travel as an "ATI TRAVEL VETERAN," ATI PROMOTIONAL DISCOUNTS, "OVERLAP DISCOUNT" for overlapping consecutive trips, etc.

- _____ . _____ _____ Please describe

- _____ . _____ _____ Please describe

- _____ . _____ _____ Please describe

YOUR TOTAL ATI PROGRAM #3 COST:

= _____ . _____ The total cost which you are paying for your ATI PROGRAM after additional charges, discounts, etc.

YOUR TOTAL ATI PROGRAM #1 COST (Same as above): _____ + _____ . _____

YOUR TOTAL ATI PROGRAM #2 COST (Same as above): _____ + _____ . _____

YOUR TOTAL ATI PROGRAM #3 COST (Same as above): _____ + _____ . _____

YOUR TOTAL COST FOR THESE ATI PROGRAMS: _____ = _____ . _____

DEPOSIT:

I am sending a check as a deposit of approximately _____ % of my total cost for the above listed ATI program to accompany my ATI Application Form and reserve my space in the program.

The exact amount that I am sending is:

- _____ . _____

BALANCE:

After subtracting my deposit from my total program cost, I believe that my balance for the above listed program is:

= _____ . _____

ADULT APPLICANT SIGNATURE:

I have read and understand the "ATI APPLICATION FORM" and "ATI TOUR PARTICIPANT AGREEMENT INCLUDING RELEASE OF LIABILITY" and agree to be bound thereby:

Applicant's signature _____

Date _____

PARENT OR LEGAL GUARDIAN SIGNATURE:

If the applicant is under 18 years of age, the following must be completed by their parent or guardian:

I am the parent or legal guardian of the following minor applicant. (Please write name of minor.)

I have read and understand the "ATI APPLICATION FORM" and "ATI TOUR PARTICIPANT AGREEMENT INCLUDING RELEASE OF LIABILITY" and agree to be bound thereby:

Parent or legal guardian signature _____

Date _____