|  |  |
| --- | --- |
|  | 2018 Pentathlon Invoice |
| PO Box 4351Mankato, MN 56002 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Qty | Item # | Description | Unit Price | Line Total |
|  | PNFT | Pentathlon National Finals Team | 400 |  |
|  | PNFTO | Pentathlon National Finals Team – Online | 200 |  |
|  | PNFI | Pentathlon National Finals Individual | 100 |  |
|  | PNFIO | Pentathlon National Finals Individual – Online | 50 |  |
|  | PNFL | Pentathlon National Finals Add’l Breakfast | 20 |  |
|  | PNDN | Pentathlon National Finals Add’l Dinner | 25 |  |
|  | PNFBQT | Pentathlon National Finals Add’l Banquet | 25 |  |
|  | PNFS | Pentathlon National Finals Shirts (S-XL) | 13 |  |
|  | PNFSXX | Pentathlon National Finals Shirts (XXL) | 14 |  |
|  | PNFSS | Pentathlon National Finals Shirts Shipping | 10 |  |
|  | PNFCC | Pentathlon National Finals CC Processing | 5 |  |
|  |  |  | Total  |  |

**Make all checks payable to United States Academic Decathlon**

**T**he following information MUST be provided when paying by credit card.

**Please print legibly**

Cardholder’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cardholder’s Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (CREDIT CARD BILLING ADDRESS REQUIRED FOR CREDIT CARD ORDERS)

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Exp. Date: \_\_\_\_\_\_\_\_

 VISA  MASTERCARD

Signature of Cardholder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (THE CARDHOLDER'S SIGNATURE MUST BE ON FILE AT USAD TO PROCESS CREDIT CARD ORDERS)

Email and fax security is not guaranteed

FORM AND PAYMENT

MUST be received by

May 1, 2018

 ***E-mail or mail***

 ***form and payment to:***

**USAD**

**PO Box 4351**

**Mankato, MN 56002**

pentathlon@usad.org