

RESERVATION CONFIRMATION

YES I will attend Chrysalis Flight # _____ on _____

NO I have a conflict. Please move my reservation to the next flight

Name:

Address:

Phone:

E-mail:

Enclosed is my final payment of \$100

My Balance will be paid at Send-Off

My Balance has already been paid

My Church will be paying my Balance

RETURN THIS FORM WITHIN TWO (2) WEEKS OF THE FLIGHT DATE TO:

Central Carolina Chrysalis
Attn: Registrar
PO Box 11812
Charlotte, NC 28220