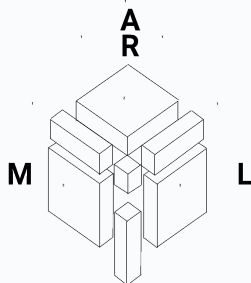


YOU CAN USE THE PDF VERSION OF THIS FORM TO DO THE CALCULATIONS ON YOUR COMPUTER. WHEN YOU ARE DONE, PLEASE PRINT IT AND **BRING IT WITH YOU TO THE MEET.**



N CAROLINA 2025 Bill

TEAM NAME(S) _____

NUMBER OF TEAMS _____

OF STUDENTS _____ @ \$175 \$ _____

NO. OF NON-VOLUNTEER ADULTS FRIDAY _____ @ \$135 \$ _____

NUMBER OF PEOPLE IN THE DORMS THURSDAY

OF SINGLES _____ @ \$34 \$ _____

OF DOUBLES _____ @ \$23 \$ _____

NUMBER OF PEOPLE IN THE DORMS SATURDAY

OF SINGLES _____ @ \$34 \$ _____

OF DOUBLES _____ @ \$23 \$ _____

TOTAL FEES FOR ARML 2025 DUE AT MEET \$ _____

ENTER AMOUNT PREPAID: \$ _____

AMOUNT STILL OWED \$ _____

Please remit to:
Linda Berman
ARML Treasurer
241 Central Park West APT 17E
New York, NY 10024-4826