

US Integrity Touring Company Payment Center

***PO Box 37 Barron, WI 54812 715-690-7328
pamusit@gmail.com***

Welcome, Texas Methodist Chorale!

Your custom performance tour to Ireland and Scotland is ready for you! We know you're going to have a wonderful musical touring experience. First, though, we need to get you signed up. This letter outlines how you can register and how to handle your payments.

There are just three steps:

- 1. Fill in the Tour Signup Form and Payment Authorization Form.**
- 2. Send the forms and a copy of your passport to us at the USIT Payment Center, and give or mail copies to your director.**
- 3. Apply for or renew your passport if necessary. Please begin this process early!**

Here's how it works:

Your payment schedule consists of thirteen payments: a deposit of \$250, eleven payments of \$260 and a thirteenth payment of the balance due by April 22, 2018:

- April 22nd, 2017: your registration payment of \$250**
- Payments of \$260 due by the 22nd of the month from May, 2017 through March, 2018**
- A final payment of the balance due by April 22, 2018**

The amount of the final payment is determined by the type of room occupancy you have chosen and any other additional charges as stipulated in your contract, such as airline or bus surcharges or currency fluctuation

All invoices and statements will be emailed to the address you supply us on the Payment Authorization Form and the due date is the same for check or credit card, so please allow 5-7 days for checks in regular mail to arrive. We look forward to working with you, and if you have any questions about the process or your account, please feel free to contact me by phone or email. Also enclosed is a quick reference guide and answers to frequently asked questions.

Sincerely,
Pamela Johnson, Director

What you need to do:

1. **For each person traveling:** Make 2 copies of the completed Tour Signup Form, 2 copies of your passport or passport application, and 1 copy of your completed Payment authorization form (credit card or check).
2. Send the original forms to the Payment Center along with your deposit check, payable to USIT, or credit card information to the address below before April 22, 2017. (This registers you for the tour.) Please use Priority Mail with tracking and send to:

**USIT Payment Center
PO Box 37
Barron, WI 54812-0037**

Scanned and emailed applications are also accepted if you mail in the originals. Please do NOT put credit card information or passport copies in an email.

3. Send or give one copy of the Tour Signup Form and your passport or passport application, or to your group director. (Please—this is important.)
4. Keep one copy of everything for yourself.

After this information has been received, you will be sent, via email, an invoice detailing the payment schedule again and each month you will receive a statement showing payments received and amount due.

Some other suggestions to make everything go smoothly

- Enter our email address (pamusit@gmail.com) in your email address book so our statements won't go to your spam folder.
- Please write your **group name** on your check.
- Please fill in the Tour Forms completely. All the information is important for the fulfillment of your reservations and ticketing.

FAQ's

- **Why do I have to fill in two forms?** The Tour Signup Form is your personal contract, and it guarantees all the tour benefits that you are receiving. It also conveys your commitment to the terms of the touring contract. The payment form is solely for the purpose of paying for the tour.
- **What if I don't get an invoice or statement?** If you do not hear from us by email, please call our office phone number (715-690-7328) or email us. We may not have received your signup form or perhaps your email address wasn't entered correctly. If you receive your initial statement, but not one for the next payment, please call.
- **Can I pay more than the required monthly amount?** Yes. The increased amount will show on your statement.
- **How is the final payment determined?** On your signup form, you will see that your room occupancy determines your rate. Subtract the total of your nine payments from that amount, and you will have an **approximate** final payment. There may also be some minor additional charges as outlined in your contract.
- **What happens if I don't make my payment on time?** If your payment is late, you will be charged a late fee of \$5.00 for each late payment. Please read your contract for USIT policy on payments more than 60 days late, so it is essential that your final payment is on time. Also, there is a \$35 fee for insufficient funds or credit card chargeback.
- **What if I can't go on the trip?** Per the Tour Signup Form, you must notify USIT in writing or by email, and we will suspend the billing. Refunds require approval from John Sabol, USIT's International Tour Director. **USIT highly recommends the purchase of travel insurance to cover reimbursement to you in the event that you cannot participate in the tour for any covered reason.**

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The Texas Methodist Chorale Performance Tour of Ireland and Scotland

CHECK Payment Authorization Form Due by April 22, 2017

Please fill in one of these forms for each person even if you are members of the same family. Please print. Fill in completely and accurately and return it to the Payment Center address with your Signup Form and passport information. We recommend that you send it by Priority Mail traceable or Express Mail. Please waive signature for delivery.

Name of Tour Participant as **shown on passport** _____

Street Address _____

City _____ State _____ Zip Code _____

Email address for billing _____ Phone _____

Is more than one member of your family travelling? If so, please fill out a separate form for each person.

Please indicate which church you belong to. _____

I am paying ___ \$3,391.85 for Triple Occupancy (limited), ___ \$3,391.85 for Double Occupancy,
___ \$4,125.18 for Single Occupancy

With whom will you be rooming? _____

Are you providing your own airfare? Y N (Airfare is included unless you tell us differently. A land only deduction will be credited to you when air fares are determined)

_____ I wish to pay by check. (Checks should be made out to USIT). **Please put your group name on the check.**

I hereby agree that I will be billed for 12 (twelve) payments (including deposit) and a final 13th payment as outlined in the Payment Information Letter and Contract. The amount of the final payment will be determined by my rooming arrangement and other conditions outlined in the contract.

Signature _____ Date _____

If you wish to change your payment option, you must notify the Payment Center at least 15 days prior to a scheduled payment. You may do this by email, phone or letter. Please do NOT send credit card information through email. **If you change your option to pay by credit card, a 3% surcharge will be added to the final payment for the total of the credit card transactions.**

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CREDIT CARD Payment Authorization Form Due by April 22, 2017

Please fill in one of these forms for each person even if you are members of the same family. Please print. Fill in completely and accurately and return it to the Payment Center address with your Signup Form and passport information. We recommend that you send it by Priority Mail traceable or Express Mail. Please waive signature for delivery.

Name of Tour Participant **as shown on passport** _____

Street Address _____

City _____ State _____ Zip Code _____

Email address for billing _____ Phone _____

Is more than one member of your family travelling? If so, please fill out a separate form for each person.

Please indicate which church you belong to. _____

I am paying ___ \$3,391.85 for Triple Occupancy (limited), ___ \$3,391.85 for Double Occupancy,
___ \$4,125.18 for Single Occupancy

With whom will you be rooming? _____

Are you providing your own airfare? Y N (Airfare is included unless you tell us differently. A land only deduction will be credited to you when air fares are determined)

_____ I wish to pay by credit card (Visa, MasterCard, Discover, American Express) Circle one

Name on Card _____

Card Number _____ Exp. Date _____

Authorized Signature _____ Date _____

I hereby agree that above card will be billed for 12 (twelve) payments (including deposit) and a final 13th payment as outlined in the Payment Information Letter and Contract. The amount of the final payment will be determined by my rooming arrangement and other conditions outlined in the contract. Please notify this office of any change in credit card number or expiration date at least 10 days before a payment due date. **If you choose to pay by credit card, a 3% surcharge will be added to the final payment for the total of the credit card transactions.** If you wish to change your payment option, you must notify the Payment Center at least 15 days prior to a scheduled payment. Please do NOT send credit card information through email.