



Overnight Registration & Payment Form

Name of Adventure: _____

Rooming Information

Single Double

Handicap Accessible? Yes No

Dietary Needs

Please list any dietary needs / allergies: _____

Participant Information* for person(s) in this room:

Name: _____ Date of Birth: _____

Street: _____ Apt / Unit: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____

Cell Phone (that will be taken on adventure): _____

Name: _____ Date of Birth: _____

Street: _____ Apt / Unit: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____

Cell Phone (that will be taken on adventure): _____

*MY CU will not sell contact information.



Overnight Registration & Payment Form

Payment Options:

Automatic Deduction from MY Credit Union Account

Check

MY Credit Union Visa Points

Gift Certificate

Automatic Deduction from MY Credit Union Account

Fill out the below information to permit MY Credit Union to pull funds from your account.

Checking: _____ Dollar Amount: _____

Savings: _____ Dollar Amount: _____

I acknowledge these funds will be taken from my account. _____

Payment by Check

Checks can be dropped off at any branch location, or mailed to:

MY Credit Union Adventure Club
c/o Tara Kingsley
9550 Lyndale Ave S
Bloomington, MN 55420

Please include the following information if you are mailing in your check.

Checks should be made payable to: MYCU Adventure Club.

Check No. _____ Amount Enclosed: _____

MY Credit Union Visa Points

Please contact adventureclub@mymncu.org for information regarding this payment option.

Gift Certificates

Gift Certificates may be used one per person per adventure. Redeem by contacting adventureclub@mymncu.org and mailing certificate to:

MY Credit Union Adventure Club
c/o Tara Kingsley
9550 Lyndale Ave S
Bloomington, MN 55420