



**SEND TO:**  
**PROMISE for HAITI, Inc.**  
**C/O TREASURER**  
**4402 HOWELL PLACE**  
**NASHVILLE, TN 37205**

TEAM: \_\_\_\_\_

DATES: FROM \_\_\_\_\_ TO \_\_\_\_\_

TEAM LEADER: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

	NAME	x \$ 40.00 # NIGHTS	/Night	TOTAL / Person
1				
2				
3				
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16				
17				
18				

AIRLINE \_\_\_\_\_

ARRIVAL : \_\_\_\_\_  
 RETURN: \_\_\_\_\_

**TEAM TOTAL DUE: \$ \_\_\_\_\_**