

ALTAIR SKI & SPORTS CLUB EVENT DEPOSIT SLIP

Deposit Date: _____

Event: _____

Leaders Names: _____

CHECKS				VISA/Mastercard	
	Check #	Amount	Name (Required)	Amount	Name (Required)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14				Gift Certificates	
15				Amount	Name (Required)
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
			Total Checks		Total Gift Certificates

	Total Checks
	Total Credit Card Charges
	Total Gift Certificates
	TOTAL ALL INCOME

Distribution:

1. One copy to be retained by Preparer
2. Two copies to be submitted to the Treasurer