

SKYDIVING SCHOOL ADVENTURE

123 Altitude Way, Dropzone City
Phone: (555) 010-JUMP

INVOICE NO: _____

DATE: _____

BILL TO:

JUMP DETAILS:

Instructor: _____
Aircraft: _____
Altitude: _____

Description	Qty	Unit Price	Total
Tandem Jump / AFF Level Training	_____	\$ _____	\$ _____
Media Package (Video & Photos)	_____	\$ _____	\$ _____
Equipment Rental (Rig, Altimeter, Suit)	_____	\$ _____	\$ _____
USPA Membership / License Fees	_____	\$ _____	\$ _____
Subtotal: \$ _____			
Tax: \$ _____			

Total Due: \$ _____

Blue Skies and Soft Landings!

Payment is due upon completion of safety briefing. All jumps are subject to weather conditions.