

SURFING ADVENTURE SCHOOL

123 Ocean Drive, Reef Bay
contact@surfingadventure.com

INVOICE

Date: _____
Invoice #: _____

BILL TO:

Description	Hours/Qty	Rate	Amount
Private Surf Lesson			
Group Adventure Package			
Equipment Rental (Board/Wetsuit)			

Subtotal: \$ _____

Tax: \$ _____

TOTAL DUE: \$ _____

Thank you for riding the waves with us!

Please make checks payable to: Surfing Adventure School