

RAMP Application Payment Information

Primary Contact Name _____

Title _____

E-mail Address _____

ASCA Member Number (if applicable) _____

School _____

School Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

_____ Application fee \$200 per application
(\$400 for school without an ASCA member)

_____ Purchase order handling charge, \$10

_____ Total

- Check
 Purchase Order
 Credit card American Express VISA Mastercard

Credit Card No. _____

V-Code _____

Exp. Date _____

Signature _____

Mail completed payment page along with completed signature page and FOUR copies of your CD to:

ASCA RAMP Application
1101 King St., Suite 625
Alexandria, VA 22314