

MasterMinds 2026-2027 Billing Information Form

School: _____

Contact for Billing: _____

Contact's e-mail: _____

Contact's phone number: _____

Billing Address _____

Purchase Order Number(s) _____
(If applicable)

It is our intention to participate in the following activities:

☐ **Varsity MasterMinds (HS)** ☐ **Junior Varsity MasterMinds (HS)**

☐ **Early Billing:** We wish to be billed by November 15, 2026 (1% discount applied)*

☐ We wish to be billed after the season for quiz bowl or chess has started

*See second page for description of all possible discounts

Please submit to: CYPRAS, Inc.
221 Norris Dr., Suite 2
Rochester, NY 14610

Scanned forms may also be submitted as a pdf file.

E-mail to: cypras@rochester.rr.com