

Financial Assistance Request Form

To request financial assistance with band fees, please complete this form and return it to Mr. Barton. All information provided on this form is confidential and will not be shared.

| Student Name | Grade |
|--------------------------|-------|
| Parent/Guardian Name(s) | |
| Parent/Guardian Email(s) | |
| Address | |
| Parent/Guardian Phone(s) | |

Please give complete and honest information. The McMinnville Band Parent Organization will do their best to accommodate your family situation. Please request the lowest amount of assistance necessary, as we rely on student fees to provide transportation, meals, music, instructors, facilities, etc.

Extended Payment Plans should be the first choice. Half Grants allow for more families to be helped. Full Grants should only be requested in case of extreme hardship.

Circle aid requested: Extended Payment Half Grant Full Grant

Please provide information for consideration of granting financial assistance:

All families requesting assistance are required to participate in all fundraisers. You must re-apply for each year as the Band Parent Organization fundraising will determine the amount of support we can offer.

[] Check this box acknowledging your fundraising/application responsibilities.

For director's use: