

Bettendorf Show Choir Financial Assistance Application 2019-2020

Student Name: _____ Student Phone: _____

Parent/Guardian Name: _____ Parent/Guardian Phone: _____

Parent/Guardian Email: _____

Mailing Address: _____

Student's Birthday ____/____/____ Student's Current Age _____

For parent/guardian completion: Please explain your reason for requesting financial assistance:

For student completion: Why do you feel that your participation in BHS Show Choir is important and valuable to you?

Upon receipt of this form, the BHS Activities director and choir directors will review applications and schedule a meeting with parents/guardians in a confidential manner. Funds are offered determined by need and availability. Financial Assistance contracts will be created for each individual student/family during the meeting mentioned above.

Financial assistance is subject to the following criteria:

- The student must participate in all fundraising activities through the Bettendorf Fine Arts Boosters during the course of the year.
- Parents/guardians must volunteer to work a set amount of hours as determined at the meeting with administration/directors based on monetary need.
- This application MUST be received into the BHS Activities office or to a director NO LATER than July 1st.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____