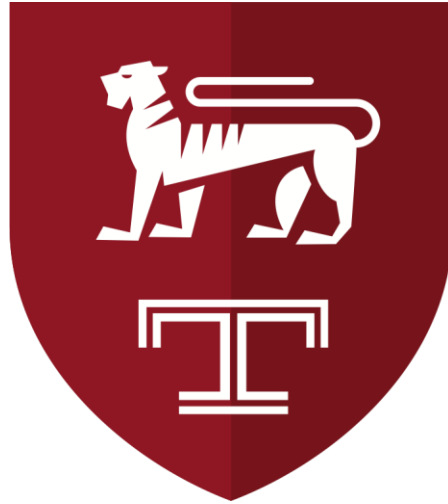


Band Fee Scholarship Application



Student Name: _____

Years in band _____

Reason for requesting scholarship _____

Parent Name: _____

Phone Number: _____

Reason for requesting scholarship _____

Scholarship requested

Half Fee (\$100) _____ Full Fee (\$200) _____