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# WALNUT GROVE BAND BOOSTER ASSOCIATION PRIVATE LESSON FINANCIAL AID APPLICATION

*The Walnut Grove Band Booster Association provides financial aid money to partially cover the cost of private lessons for participating band students with a financial need. The money allocated for this is limited and will be provided on a first-come, first-served basis.*

Student's Name \_\_\_\_\_ Instrument \_\_\_\_\_

Parents' Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Please explain briefly your reasons for seeking WGHSBBA financial aid \_\_\_\_\_

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**Student's agreement:** I understand that a private lesson assistance is a privilege, and I will do my best to deserve it by being a responsible band member. This means that I will practice my instrument, attend band rehearsals and sectionals whenever I'm supposed to, and help with the band fundraising activities. By accepting this financial assistance, I am making a commitment to stay in band through the following school year.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Parents' agreement:** The financial information provided in connection with this application is true and correct. I understand that a private lesson assistance is a privilege and I will do my best to see that my child takes full advantage of it. I realize that the money that supports the assistance along with many other band activities comes from the fundraising efforts of members of the WGHSBBA and that one of the factors in the allocation of financial aid awards is mine and my child's commitment to the band program. I have read the student agreement above and will help my child fulfill it. I will also do my best to support my child's band in its activities. I understand that I will, in turn, help support the band by volunteering as often as I can. This assistance is accepted in good faith, and when it is no longer needed, I will let the band director know so that another deserving student may benefit from it.

Signed \_\_\_\_\_ Date \_\_\_\_\_



Private lesson teacher's name \_\_\_\_\_

The above student is approved for \_\_\_\_\_ from now until \_\_\_\_\_

Director's Signature \_\_\_\_\_