

Jenison Band Boosters Financial Assistance Application
*Request for financial assistance should be submitted by **April 9, 2024***

In their support of the Jenison Band program, the JPS administration and the Jenison Band Boosters hope to assist families with significant financial needs to meet some expenses of band program participation. Financial assistance may be granted in the form of a reduced participation fee, or simply in reduced monthly payments over a longer period of time. **You must qualify for the federal assistance program for free or reduced lunch to be eligible for a reduction in participation fees. Financial assistance may not exceed half of the total cost for any given Marching Band season.**

Students/parents who apply for financial assistance must participate in Band Booster fund raisers to help in lowering the cost of their child's expenses. This participation may be in the form of selling fundraising products or volunteering your time. Financial assistance is intended to enable **students** to participate and travel with the band. Financial assistance is **not** intended to decrease costs to enable a student's family to travel with the band. Such requests will not be honored.

Due to the fact that financial assistance is granted according to the number of requests, the individual need(s), and the total amount of money available from JPS and JBB, the amount of financial assistance to be awarded may not be determined until early July. Regular payments must be made until this amount has been determined.

This matter is strictly confidential and will only be handled by the Financial Assistance Committee.

Student's Name: _____

Parent's Name: _____

Address: _____

Email Address: _____ Phone Number: _____

Describe in detail your particular situation and why you are requesting financial assistance: _____

Do you feel that making smaller payments over a longer period of time would help in your situation? If yes, how much do you feel you could reasonably pay each month? _____

How much do you feel is needed to help in your situation? \$ _____

Do you qualify for free or reduced lunch? ____ Yes ____ No

Signing below indicates that you DO want school officials to share the status of your Free and Reduced Price School Meals Application with the Jenison High School Band Directors as part of the marching band financial assistance process.

Parent Signature: _____ Date: _____

Please bring or mail this form to the Jenison High School Band Office, c/o Dave Zamborsky, or scan and email it to dzambors@jpsonline.org. Email Mr. Zamborsky or call the Band Office at 667-3369 if you have questions about this form.