



# BENTONVILLE WEST MARCHING BAND

## 2024-2025 Band Fee Assistance Program

It is critical for the success of the Bentonville West Marching Band that each student pay their fair share of expenses in a timely manner. Most expenses are incurred in the Fall. The Band Fee Assistance Program is intended to help cover expenses while minimizing the financial burden to families. There are two ways to receive assistance:

1. **Student Band Fee Scholarship:** Students may be eligible to receive a full or partial Band Fee Scholarship for the 2024-2025 season. Scholarships are limited and based on funds available.
2. **Student Band Fee Extended Payment Plan:** Students who do not qualify for a scholarship may be eligible for the Band Fee Extended Payment Plan, allowing smaller payments over a longer period.

Refer to the 2024-2025 Financial Letter for a breakdown of what is covered by band fees.

**Students who receive assistance are expected to participate in fundraising opportunities to help offset the cost of their fees.** Additionally, volunteer work will be required and can be fulfilled by the student or family/friends on behalf of the student. Visit [www.bwestband.com](http://www.bwestband.com) for current opportunities.

Please complete this form to apply for assistance and provide with your signed Financial Agreement. You will be contacted when a decision is made, and additional details and forms will be provided for eligible students.

*Information will remain confidential and only discussed by deciding parties.*

Student Name: \_\_\_\_\_ Student 9 Digit ID: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ email: \_\_\_\_\_

Do you qualify for lunch assistance at Bentonville West High School?  No  Free Lunch  Reduced Lunch

What is the amount you pay for reduced lunch at Bentonville West High School? \_\_\_\_\_

Are you seeking an Extended Payment Plan?  Yes  No

Please describe your financial need.

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By signing below, I agree the information provided above is accurate to the best of my knowledge and completing this form does not guarantee assistance will be granted.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_