

**Application for Booster Club
Financial Assistance for a Class / Activity Optional Fee**

Date of Application		School	
Student Information			
Student Name		Student ID	
Student Grade		Parent Name	

Event Information			
Class / Activity		Amount of Optional Fee	
Reason for Optional Fee			

All information provided on this form will be kept confidential.

Please check the appropriate box:

- I am requesting assistance for the full amount of the fee.
- I am applying for a partial assistance and plan to pay \$_____.

Please describe your financial need/hardship:

Parent Signature:	
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Completed forms should be returned to the Main Office by _____.

Please submit all forms to the _____ Booster Club Folder.