

# GULF BREEZE HIGH SCHOOL BAND

## APPLICATION FOR FEE WAIVER AND SCHOLARSHIP

Student Name \_\_\_\_\_

Meal Program Enrolled in: Free ( ) Reduced ( )

Please waive \$ \_\_\_\_\_ for the following band fee(s) \_\_\_\_\_

Please provide a scholarship of \$ \_\_\_\_\_ for the following band trip: \_\_\_\_\_

I have read the guidelines in the GBHS Handbook and understand the requirements necessary for waived fees and/or trip scholarships. I further give permission for the Gulf Breeze High School Band Director to verify that the above student is in the Florida Free and Reduced Price Meal Program.

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

**NOTE:**

The information on and actions taken with this application will be held in strict confidence. Only the Band Director and the Booster Treasurer will have knowledge of the application the action taken. The Treasurer will contact the parent/guardian when requirements are met and fees have been waived and/or a trip scholarship has been awarded.

This application should be put in an envelope and given to the Band Director.