



Meade County High School Band
www.meadebands.org

Hardship Form

We recognize the hardships that participation in the Meade County High Marching Band may cause due to heavy financial obligations. We do not want students to be denied participation in the band program due to financial difficulties. If financial difficulties arise, the MCHS Band Boosters and the Directors will be more than willing to work with you to schedule payments that may better suit your family's needs. If a family has difficulties in meeting these payments, they should file for hardship.

Student Name

Date

_____ **I AM REQUESTING AN ALTERNATIVE PAYMENT PLAN.** You may make monthly payments of a specified amount agreed upon by the Director.

_____ **I AM REQUESTING A HARDSHIP.** This will require an *individual* meeting with the Director.

I, _____, agree to payments totaling \$550 for the 2024-25 school year for my student _____. I agree to the following payment schedule: _____

-----This portion is ONLY if requesting a Hardship -----

Amount Requested: _____ (ex. half of fees, all of fees, etc.)

Parent/Guardian's Name

Parent/Guardian's Signature

Date

Kevin Leonard, Director of Bands

Date