



Clover Band Boosters

PO Box 952
Clover, SC 29710

Band Fees Payment Schedule Form

2014-2015 School Year

Application Deadline: **3:00 pm, Friday, May 23, 2014**

Please complete the following and submit the application to the Band Director's Office, the Band Room Drop Box, or by mail to Clover Band Boosters, PO Box 952, Clover, SC 29710.

ALL information is kept confidential.

🎵 Required information

🎵 Parent/Guardian Name: _____

🎵 Parent email address: _____ 🎵 Parent phone: _____

🎵 Student Name: _____ 🎵 Grade: _____

Student email address: _____

🎵 Instrument(s): _____

🎵 Requested payment schedule

Fee Type	Date	Amount
Intent fee	May 31 st - required in full	\$100.00
2 nd payment	_____	_____
3 rd payment	_____	_____
4 th payment	_____	_____
5 th payment	_____	_____
TOTAL	Paid in full by September 1 st	\$300.00

An example:

Intent fee	May 31 st - required in full	\$100.00
2 nd payment	<u>June 15th</u>	<u>\$62.50</u>
3 rd payment	<u>July 1st</u>	<u>\$62.50</u>
4 th payment	<u>July 15th</u>	<u>\$62.50</u>
5 th payment	<u>August 1st</u>	<u>\$62.50</u>
TOTAL	Paid in full by September 1 st	\$350.00

Signature: _____ Date: _____

Parent or Guardian