



FEE/TUITION ASSISTANCE APPLICATION FORM

DEADLINE TO APPLY: *Two weeks before academy/production/workshop begins. Keep in mind that academies & workshops fill up quickly. Spots filled on a first come first served basis.*

PART ONE: Participant Information

Participant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of Parent or Guardian (who takes care of the child): _____

Home Phone: _____ Cell Phone: _____

Email: _____

PART TWO: What ArtsView academy/production/workshop does the participant wish to participate in?

Academy/Production/Workshop Name: _____

Regular Cost: _____ Reduced Cost: _____

Please tell us why you want to participate in the academy/production/workshop.

(Written in student's own words on another sheet of paper.)

PART THREE: Fee assistance is based on family's need for assistance.

School attended by Student: _____ Phone: _____

To qualify for fee assistance, parents must explain their need for financial assistance. This information will be kept confidential. Three ways to qualify are listed below.

Check which one applies to your family:

- Student is part of the **FREE LUNCH** program at school (provide documentation)
- Student is part of the **REDUCED LUNCH** program at school (provide documentation)
- **A letter is attached to this form explaining the family's need for financial assistance.**
- (Letter may be written by parent, counselor, social worker, accountant or clergy, etc.)

To fully assist the maximum amount of children per year with the funding that is available, the following fee assistance policies have been implemented:

- 1st – 3rd time fee assistance is provided per year – participant pays 15%*
- 4th – 6th time fee assistance is provided per year – participant pays 25%*
- 7th – more times fee assistance is provided per year – participant pays 50%*

Fee/tuition assistance awards are announced before or by the week before the academy/production/workshop begins.

I agree to provide 5% of the fee/tuition WITH THIS APPLICATION and to pay the remaining portion I owe for the academy/production/workshop in full by 5 working days after fee assistance is granted. I also understand that participants are expected to attend EACH DAY of the academy/production/workshop, and that I am responsible for the participant's transportation to and from ACT.

I understand that ArtsView takes great pride in our Fee Assistance Program. No child is ever turned away from our programs because of inability to pay. If unforeseen circumstances arise and my child is unable to attend programming that is fee assistance funded, ACT requires 24 hour notice, so that monies are available for another student in need. Failure to give 24 hour notification will result in the loss of the academy fee paid by participant. With 24 hour notification, full refunds of the academy fee will be issued as long as we have at least one person on a stand by list waiting to fill my child's spot..

Parent/Guardian Signature: _____

Date: _____

Attached is payment of _____ *(5% of the academy/production/workshop fee is required to complete application).*

CASH: _____ **CHECK NUMBER:** _____

(A \$25 fee will be charged for returned checks due to NSF.)

CREDIT CARD NUMBER: _____

EXP: _____ **V-CODE:** _____

Name as it appears on card: _____

FOR OFFICE USE ONLY:

Payment Accepted By: _____ Date: _____

Hold until _____ for receipt of payment. Initials: _____