

CHS "Copper Thunder" Marching Band Fee

School Year _____ - _____

Marching Band Fee: \$125.00

Due: August 3, 2021

Student Information:

Name:			
School: CHS EHS AHS VAHS	Grade: 9 10 11 12		
Marching Band	Color Guard	Shirt Size:	Unisex Ladies

Payment Options: Boosters will be available to collect forms and fees each morning of Band Camp.

	Cash
	Check (Please make check payable to: CHS Music Program Boosters)
	Zelle: Chsvbb@gmail.com First Name: CHS Last Name: Band – Please put student name in Notes
	Debit/Credit - A fee of \$5.00 will be added to cover transaction costs. VISA MASTERCARD
	Student Account: Boosters will request available funds from the Student Account.
	Combination: (Please Explain):
	Monthly payment plan (details below)
	Request Fee Waiver Application

CHS Marching Band Booster Fee – Monthly Payment Plan 2021

First Payment Due: (Includes Administrative Fee)	August 3, 2021	\$50.00
Second Payment Due:	September 7, 2021	\$30.00
Third Payment Due:	October 5, 2021	\$30.00
Fourth Payment Due:	November 2, 2021	\$30.00

My student, named above, has enrolled as a member of the Copper Thunder Marching Band with a Booster fee of \$125.00. As the parent/guardian, I enter into this contract and agree to pay the complete balance due, including an administrative fee of \$5.00 for this debit/credit transaction, as well as an additional \$10.00 fee for administrative costs associated with the Monthly Payment Plan, as described above. I authorize Cienega HS Instrumental Music Program Boosters to charge the following card, as stated above, to meet my agreed upon monthly obligations:

Parent Signature:		Date:
Card Type: <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD	Billing Zip Code:	
Please Charge Card Today for:	<input type="checkbox"/> Marching Fee PIF \$130.00	<input type="checkbox"/> Payment Plan Installment(s)
Card #:	Exp. Date:	CVV:
Send receipt to:	Email:	Text:
Booster Representative:		Date:

Questions: Please contact the Booster Program at chsvbb@gmail.com or Treasurer at treaschsvbb@gmail.com.

Booster Use Only

Date:	Total Amount Received: \$	Received by:
<input type="checkbox"/> Cash	<input type="checkbox"/> Check #	<input type="checkbox"/> Credit/Debit
<input type="checkbox"/> Student Account	<input type="checkbox"/> Zelle	<input type="checkbox"/> Monthly Fee Waiver