

Manteno Show Choir Boosters

PO Box 384

Manteno, IL 60950

Financial Assistance Request Form

Please complete this form and mail to the address listed above.

Please be advised, if you are granted financial assistance, you will be required to volunteer for **at least 16 hours**. (IE volunteering for fundraisers, chaperoning for competitions, etc.)

This form must be submitted to the Board by **November 1st** to be considered for Financial Assistance.

Name of Applicant: _____

Student Name: _____

Date of Request: _____

Amount Requested: _____

Reason for Assistance: _____

For Board Use Only

_____ Approved Amount Granted: \$ _____ Denied

Explanation: _____

Officer Signature: _____ Title: _____ Date: _____