

# North Lincoln High School Band Boosters Association, Inc. Application for Reduced Fees (2024-2025)

**1. Print names of all children participating in the North Lincoln High School Band Program:**

LAST NAME	FIRST NAME	GRADE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Complete and return this form to the North Lincoln High School Band Boosters Association, Inc. (NLBB) Student Account Treasurer if your family total net income meets the "Income Eligibility Guidelines for Reduced Fees" given below. The NLBB Student Account Treasurer uses the information on this application to determine if your band student qualifies for a reduction in band fees for the present school year. A new application must be completed at the beginning of each school year. Only the NLBB Student Account Treasurer and the band directors have access to this information.

**2. Household member and ALL income information:**

2.a List the names of all people living in your house including students	2.b Earnings from Work before deductions.	2.c Welfare, Alimony, Child Support	2.d Social Security, Retirement, Pension	2.e Other income
NAME	\$ amt per _____ (frequency)	\$ amt per _____ (frequency)	\$ amt per _____ (frequency)	\$ amt per _____ (frequency)
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				
7. _____				
8. _____				

3. **Signature:** I certify (promise) that all of the above information is true and correct and that I have listed all income. I understand that this information has been given to determine eligibility for a reduction of marching band fees. I understand that NLBB Treasurers may verify (check) the information. I understand that if I purposely give false information, my children may lose fee benefits, and I may be prosecuted.

\_\_\_\_\_  
Signature of Parent/Guardian (you must sign) Date \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Income Eligibility Guidelines**

Household Size	Yearly Income	Monthly Income	Twice Per Month	Every Two Weeks	Weekly
2	33,874	2,823	1,412	1,303	652
3	42,606	3,551	1,776	1,639	820
4	51,338	4,279	2,140	1,975	988
5	60,070	5,006	2,503	2,311	1,156
6	68,802	5,734	2,867	2,647	1,324
7	77,534	6,462	3,231	2,983	1,492
8	86,266	7,189	3,595	3,318	1,659

After you have completed and signed the application, place it in an envelope, and return it to the "blue box" in the Band Room OR mail it to the Student Account Treasurer, North Lincoln High School Band Boosters Association, Inc., P.O. Box 1936, Lincolnton, NC 28093. You will be notified when the application is approved or denied.

**PLEASE ENCLOSE A PAYCHECK STUB OR OTHER INFORMATION FOR VERIFICATION OF INCOME.**

If you do not agree with the decision on your application, you may talk directly with the band director at the high school (704-736-1969). You will be given an opportunity to challenge a decision.