

Coopersville Band Boosters



Payment Form

Request payment for _____ fundraising contributions.
(Student name)

Grade: _____

Amount: \$_____

For the following: _____
(ie, band camp, shoes, dry cleaning, band trip)

Requestor Signature: _____

Date: _____

You can complete this form via the coopersvillebands.org webpage, print off a copy from coopersvillebands.org webpage or have your student get a form from the band room. Once filled out, please submit via web or place in a sealed envelope with your name and Band Boosters Scholarship on the front and place in the band's drop box.

Treasurer Approval Signature: _____

Amount Given: _____ Date: _____

For more information on your student's fund amount, please contact the Band Booster Treasurer and Accounts at treasurer@coopersvillebands.org and accounts@coopersvillebands.org.

