



WEST SPRINGFIELD HIGH SCHOOL BAND BOOSTERS

Student Fundraising Account Expenditure Authorization

YOU MUST HAVE SUFFICIENT CREDITS IN YOUR STUDENT ACCOUNT TO COVER THE REQUESTED DEDUCTION

I, _____, request that _____
(Print Name) (Insert Total Amount)

credits be deducted from _____ account to pay for:
(Print Student's Name)

_____ Marching Band/Fall Guard Fee

_____ Solo & Ensemble Fee

_____ Band Activity Fee

_____ District Band Audition Fee

_____ FCPS Instrument Rental Fee

_____ Spring Trip Fee

_____ Indoor Drumline/Winter Guard Fee

_____ Other _____
(Must specify a school-related band fee)

Note: "Other" expenditure of credits can ONLY be used toward FCPS band-related fees.

I certify that sufficient credits are in my Student Account to cover this deduction.

Student Signature

Date

Parent Signature

Date