

York County Elementary Choral Festival
Scholarship Support Request Form

Must be received in office by December 1, 2018

Student Name _____

Parent/Guardian Name _____

Address _____

Home Phone _____ Cell Phone _____

Email _____

Student's School _____ Grade _____

Our Scholarship Fund provides support for singers who might otherwise not be able to participate in the programs of York County Honors Choirs. We do ask that each family contribute to these expenses, if possible, so that we can stretch our funds to help all the singers who need it. The total fee for the Festival is \$30.

How much can your family contribute to your student's expenses? \$ _____

(Optional) Please explain any special circumstances related to your request.

Parent/Guardian Signature _____

Date _____

Please return this form to:

Bill Lytle, Executive Director
York County Honors Choirs
PO Box 827
York, PA 17405

Or email to executivedirector@theYCHC.org

You will be contacted with the decision regarding support and if any more information is needed. For this decision, would you prefer to be contacted by _____ phone or _____ email