



EDUCATION PROGRAMS

Financial Aid Form

The Financial Aid Program at Playground Stage Children's Theatre is based solely on need. To consider your application, it is important that you provide us with a complete financial picture of your household. **Financial aid is awarded in amounts of 25% or 50% of the tuition.** This form is due two weeks prior to the first day of class or camp, but does not guarantee a placement in the class/camp unless you submit 25% of the tuition with the application.

Please return all applications to Playground Stage by email Education@playgroundstage.org by mail PO Box 18502 Asheville, NC 28814 or in person with a Playground Stage Employee.

CLASS/CAMP NAME: _____ Tuition: _____

START DATE: _____ SCHOOL STUDENT ATTENDS: _____

STUDENTS NAME: _____ GRADE: _____

PARENT/GUARDIAN: _____ RELATIONSHIP: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PRIMARY PHONE: _____ SECONDARY PHONE: _____

EMAIL ADDRESS: _____

EARNED HOUSEHOLD INCOME (after taxes) WEEKLY/MONTHLY/YEARLY (circle one)\$ _____

ADDITIONAL MONTHLY INCOME (Social Security, Welfare, AFDC, SNAP, WIC, Child Support, Alimony, etc.)

\$ _____

Names and Ages of all Household Members:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____



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CLASS OR CAMPS PREVIOUSLY ATTENDED AT PLAYGROUND STAGE BY HOUSE HOLD MEMBERS

STUDENTS NAME

CLASS NAME

DATE

1. _____

2. _____

3. _____

4. _____

Did you receive financial aid for any of these previous classes? YES NO

Please, explain any special financial circumstances or expenses you currently have (medical bills, college tuition, legal proceedings, etc.) that you would like to be considered.

I confirm that the above information is truthful and accurate to the best of my knowledge.

Signature: _____ Date: _____

OFFICE USE ONLY			
APPLICATION RECEIVED	PAYMENT RECEIVED		
SENT TO COMMITTEE	APPROVED	YES	NO
AMOUNT AWARDED	NOTIFIED		