

THE CUE THEATRE

WHERE THE PERFORMING ARTS MEETS EDUCATION

CONFIDENTIAL FINANCIAL ASSISTANCE APPLICATION

Dear Parent/Guardian,

Thank you for your interest in our programs. We are proud to be able to offer financial assistance to ensure that all students have access to our programming regardless of ability to pay. Please read this application carefully.

IN ORDER TO PROCESS YOUR APPLICATION, PLEASE COMPLETE THE FOLLOWING STEPS:

1. **Program Application** – Complete an application for the program for which you are applying for assistance. Forms can be downloaded at www.TheCueTheatre.org
2. **Financial Assistance Application** – Complete this application in its entirety.

Student name _____

Program for which assistance is requested: _____

Home Address	_____	City/State/Zip	_____
Mother's name	_____	Father's name	_____
Mother's phone	_____	Father's phone	_____
Mother's email	_____	Father's email	_____

Family Dependents (children and others living at home)

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____

Reason for request (Explain home, family situation, child's individual needs. Attach additional page if necessary.)

Why student wants to participate in a Cue Theatre program (this should be completed by the student, attach additional page if necessary) _____

Referred by (agency or individual): _____

Approximate total annual family income for the current calendar year (this information is required) \$ _____

Our family is able to pay \$ _____ of the program fee for which I have applied. If we are unable to provide financial assistance, would you still plan to participate in the program? _____

To the best of my knowledge, the above statements are true.

Parent/Guardian Signature _____ Date _____