

## **APPLICATION**

Date:	Current OYO Sea	son:
Student Name:		
Parent Name(s):		
Address:		
City:		
Parent Email (for notification):		
Instrument:		_Years played
School:	School District: _	
Tuition Assistance Request		
☐ Full Tuition (\$400; \$350 for Studio String)		
☐ Partial Tuition – Amount requested		
Please explain your current financial situati back of form as necessary (no IRS documen		

## Please return completed form to:

Oakland Youth Orchestras P.O. Box 80186 Rochester, MI 48308 ATTN: Joanne Walle, Executive Director

OR

Email to admin@oyomi.org

